2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type o	r Print Clearly_					_						
Full Na	me Jared Patrick O'Connor				Work Address Shaheen & Gordon				n, P.A., 180 Bridge Street, Manchester NH 03104			
Primary	ary Occupation Attorney				e-mail joconnor@shaheengordon.com				rk Phone	(603) 617	7-3063	
directo	he office, positions, etc. or em ment held by yo	ploymen		e or county 📙	Vorkers' Compensatio	n Appeals Adv	isory Boa	ard	V	side side address a seminar w		
proprie	tor, or employe	e, or ser	ved in any c	ther profession	al or advisory capacit	ty, and from v	hich an	you or a family memb y income in excess o included. (Use additio	f \$10,000 w	as derived	ctor, associate, partner, during the preceding	
1.	Hudson Schoo	ol District	(SAU 81), 20	Library Street, H	ludson NH 03051 - (m	y wife is a high	school t	teacher at Alvirne)				
2.	Shaheen & Gordon, P.A., 180 Bridge Street, Manchester NH 03104 - (I am a partner at the firm)											
lf you h	ave no qualifyin	g income	e indicate by	writing your init	ials next to the follow	ing statement.		My income does	not qualify			
	al effect on you o	or a famil	y member th cupation, or l	an it would on 1 ousiness license	nment affecting the list the general public: or certified by the St			on, occupation, group, List each such	or matter w	ould poten	itially have a greater	
	2. Health Care	3. ln	surance		state, including broke evelopers, and landlo		5. Banki services	ing or financial	1 1 i	ite of New l	Hampshire, county, or yment	
IY.	7. N.H. Retirem System	ent	{ 	rrent use land ment program	9. Resta lodging	urants/		10. Sale and distribut beverages	ion of alcoh	olic 🗵	11. Practice of law	
	2. Any business r ilities Commissi		by the Publ		 Horse or dog racin gambling 	g, or other leg	al forms	X 14. Education	<u> </u>	Water Reso	urces	
	h acriculture I IVI		Business Profits Tax	Business Interest and Dividends Tax			18. Optional: S specia	18. Optional: Specify any other area in which you have a special interest				
have r person	ead RSA 15-A an who knowingly	nd hereby fails to co	swear or aff omply with the	irm that the fore	going information is t this chapter or knowi	rue and comp ngly files a fals	ete to th	ne best of my knowled nent shall be guilty of a	ge and belie misdemear	ef. RSA 15 nor.	F-A:9 Penalty. Any	
Date	January 4, 202	1					<u></u>				JAN 0.6 2021	
		Reti	urn to: Office	of Secretary of S	itate, 107 North Main !	1		re of Reporting Individom 204, Concord, NH 0		OE	NEW HAMPSHIRE EPARTMENT OF STA	