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JAN 20 2017  
NEW HAMPSHIRE  
DEPARTMENT OF STATE

2017 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly  
Full Name Harold B Parker Work Address 107 N. MAIN ST, Room 208  
Primary Occupation Policy Advisor e-mail\*optional Harold.Parker@NH.gov Work Phone 271-2121

The office, position, appointment, or employment with state government held by you: NO ACRONYMS

- A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was an officer, director, associate, partner, proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was derived during the preceding calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)
- SUNN FOR GOVERNOR, EXETER, NH.
  - LEASICA FOR AMERICA, COLUMBUS, OHIO

If you have no qualifying income indicate by writing your initials next to the following statement: My income does not qualify \_\_\_\_\_

B. Indicate below whether you or a family member has a special interest in any of the following businesses, professions, occupations, groups, or matters. A person has a reportable special interest in an item on this list if a change in law, a change in administrative rule, a decision whether or not to award a contract, grant a license or permit, discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a greater financial effect on you or a family member than it would on the general public:

1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: _____																
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
2. Health Care	3. Insurance	4. Real Estate, including brokers, agent, developers, and landlords	5. Banking or financial services	6. State of New Hampshire, county, or municipal employment	7. NH Retirement System	8. Current use land assessment program	9. Restaurants/ lodging	10. Sale and distribution of alcoholic beverages	11. Practice of law	12. Any business regulated by the Public Utilities Commission	13. Horse or dog racing, or other legal forms of gambling	14. Education	15. Water Resources	16. Agriculture	17. NH. Business Profits Tax	18. Optional: Specify any other area in which you have a special interest: _____

I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. **RSA 15-A:9 Penalty.** Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.

Date 1-23-17  
Signature of Reporting Individual 

Parker, Harold B