| | 2017 NEW H | IAMPSHIRE ST | TATEMENT OF FIN | ANCIAL INTER | ESTS - RSA 15-A | | |
|---|---|--|---|-----------------------|-----------------------------------|-------------------------------|---|
| Type or Print Clearly | | | • | | | | 03750 |
| Full Name Debora | hs Kenned | 14 | Work Add | lress home | - 494 / | anover Cfr. | Rel Emajet |
| Primary Occupation <i>[e</i> | | , | e-mail *optional <u></u> | ebby. Ko | inely D | Work Phone 4 | 03 643 6446 |
| The office, position, employment with state you. NO ACRON | government held b | or Buard | of Men | fal He | on 1 th | Proctice | |
| | or served in any oth | er professional o | r advisory capacity, an | d from which any | y income in excess | of \$10,000 was deri | director, associate, partner, ved during the preceding sary.) |
| 1. SAU 7 | 0-Dresdon | School | District - 1 | 116 - 6/ | 14 (cur | ently ret | ied) |
| 2. New Ha 3. James S If you have no qualifying i | | | | | | / / | |
| B. Indicate below whether reportable special interest discipline a licensee or perfinancial effect on you or a second sec | t in an item on this list rmittee, or other deci | t if a change in law sion by governme | v, a change in administ ent affecting the listed b | rative rule, a decisi | ion whether or not t | o award a contract, g | rant a license or permit, |
| 10 | on, occupation, or bu pation, or category of | | sertified by the State of Feaching 4 | | | ertificate | S(self) husbandsout |
| 2. Health Care | 3. Insurance | , | e, including brokers, lopers, and landlords | 5. Bank services | ing or financial | 6. State of N municipal en | lew Hampshire, county, or s |
| 7. N.H. RetirementSyster | | ent use land ent program | 9. Restauran lodging | 14 | 10. Sale and distrib beverages | oution of alcoholic | 11. Practice of law |
| 12. Any business req Utilities Commission | gulated by the Public | | Horse or dog racing, or mbling | other legal forms | 14. Educatio | n 5. Water | Resources |
| 16. Agriculture 17. N.H. taxes: Pro | | Business Profits Tax | Siness Business Interest and Specify any other area in which you have a special interest— | | | | |
| I have read RSA 15-A and | | | | | ne hest of my knowl | edge and belief | A 15-A:9-Ponnitys Arses |

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. 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 $\frac{1}{3}$

LOutoral S. Kennedy
Signature of Reporting Individual

JAN 1 2 2017

NEW HAMPSHIRE DEPARTMENT OF STATE