

JAN 1 3 2021

NEW HAMPSHIRE

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

Type or Print Clearly		27.01	d Pound Road, Antrim	NH U3440
Full Name Charles Levesque		Work Address 3/ UI	d Pound Road, Andim	
Primary Occupation   consultant & foresters	e-mad	levesque@inrsilc.com	Wark Phone	603-588-3272
Name the office, position, board or commission, boa	ly	Connecticut Lakes Citizens A		
List below the name, address, and type of any profe reprietor, or employee, or served in any other profe alendar year. Sources of retirement benefits other than I	colored the persons	one canacity, and from which any in	Cities to esercias on scottagos.	cas actives and a
Innovative Natural Resource Solution	ns, LLC			
2. If you have no qualifying income indicate by writing you	ır initials next to	o the following statement.	My income does not qualif	,
8. Indicate below whether you or a family member has eportable special interest in an item on this list if a char discipline a licensee or permittee, or other decision by g inancial effect on you or a family member than it would	ige in law, a chi overnment affo i on the genera	ange in administrative rule, a because acting the listed business, profession, t al public:	excupation, group, or matter	
Any profession, occupation, or business lic profession, occupation, or category of busines	ensed or certifi s:	ed by the State of New Hampshite. In		
	teal Estate, incluent, developers	uding brokers, 5. Banking , and landlords services		tate of New Hampshire, county, or icipal employment
7. N.H. Retirement 8. Current use assessment prog	and ram	9. Restaurants/ 18 be	. Sale and distribution of alco rerages	holic 11. Practice of law
12. Any business regulated by the Public Utilities Commission	13. Horse of gamblin	or dog racing, or other legal forms	14, 6000000	5. Water Resources
16. Agriculture 17. N.H. Busin		terprise Tax Dividends Tax	78. Optional: Specify any special interest	other area in which you have a
Thave read RSA 15-A and hereby swear or affirm that the person who knowingly fails to comply with the provision	e foregoing inf ins of this chap	ormation is true and complete to the stee or knowingly files a false statemen	best of my knowledge and be It shall be guilty of a misdemo	ief. RSA 15-A:9 Penalty. Any anor.
person with items by any to confer the person with the person		Charles ?		_
Date 1/11/21		Signature	of Reporting Individual	

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