· · · · · · · · · · · · · · · · · · ·			2021 NEV	VHAMPSHIR	RE STATEM	IENT OF FINAL	NCIAL INT	ERESTS - RS	6A 15-A	Real-side S. Prop. Lance of Patricipal States and Patricipal State	
Type o	r Print Clearly										
- Full Na	Il Name Peter Bowman			Work Address			172 Pembroke Rd, Concord, NH 03301				
Primar	y Occupation	Ecolog	ist		— e-mail	peter.bowma	ın@dncr.nl	h.gov	Work Phone	271-279	92
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			Rivers Management Advisory Committee Aquatic Resource Mitigation Site Selection_Committee								
A. List proprie	below the nare tor, or employ	ne, addres ree, or ser	s, and type o	: of any professio other professio	on, business, nal or adviso	or other organiz	ation in which	ch you or a fai any income i	mily member was an	was derived of	or, associate, partner during the preceding)
1.											
2.		****								.	
If you h	ave no qualifyi	ng incom	e indicate by	writing your in	itials next to	the following stat	ement.	My in	come does not quali	fy T	pjb
reporta discipli	ble special inte	rest in an r permitte	item on this e, or other de	list if a change ecision by gove	in law, a chan rnment affec	ige in administrat ting the listed bu	ive rule, a de	cision whether	ons, occupations, gro er or not to award a co ion, group, or matter	ontract, grant a	a license or permit,
r.	 Any prof profession, o 				ed or certified	l by the State of N	lew Hampsh	ire. List each s	such		
<u>r</u>									State of New Hampshire, county, or unicipal employment		
	7. N.H. Retirer System	nent	11	irrent use land ment prógram	<u></u>	9. Restaurants/ lodging	<u></u>	10. Sale ar beverages	nd distribution of alco	pholic	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									urces		
Γ.,	16. Agriculture		17. N.H. taxes:	Business Profits Tax	Busin Enter	1	Interest and Dividends Ta		Optional: Specify any special interest	other area in	which you have a
I have r person	ead RSA 15-A a	ind hereby	swear or aff	firm that the for he provisions of	regoing infor	mation is true and r or knowingly file	d complete t	o the best of n tement shall b	ny knowledge and be e quilty of a misdeme	lief. RSA 15	-A:9 Penalty. Any
	read RSA 15-A and hereby swear or affirm that the fo n who knowingly fails to comply with the provisions				·	D	to B	_		REC	FIVED
Date	1/7/2021						Sign	ature of Repor	ting Individual	JAN <u> i</u>	1 1 2021
		Ret	urn to: Office	of Secretary of	State 107 No	orth Main Street.	State House	Room 204 Co	ncord NH 03301	" NEW H	AMPSHIRE