## 2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	
Full Name My chard Cry and Work Address	
Primary Occupation Refiner e-mail MJCRYMS@ Hofmanl.com Work Phone	
Name the office, position, board or commission, board of directors, etc. or employment with state or county 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, or proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was der calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessalendar year.	ived during the preceding
i.	
2.	
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 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, discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would prinancial 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	grant a license or permit,
profession, occupation, or category of business:	
2. Health Care  3. Insurance  4. Real Estate, including brokers, agent, developers, and landlords  5. Banking or financial for municipal en	lew Hampshire, county, or nployment
7. N.H. Retirement System 8. Current use land assessment program 9. Restaurants/ beverages 10. Sale and distribution of alcoholic beverages	11. Practice of law
Otilities Commission or gambling	Resources
16. Agriculture  17. N.H. taxes:  Business Business Business Enterprise Tax  Dividends Tax  18. Optional: Specify any other are special interest—	rea in which you have a
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. RS person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.	A 15-A:9 Penalty. Any
	RECEIVED
Date 12. (. 22 Signature of Filer Man Cupums	JAN_0_3_2023
	NEW HAMPSHAR

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