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

Type or Print Clearly		
Full Name Wendy Stanley Jones	Work Address	
Primary Occupation Nurse	e-mail WJONES 13@ mac. (Um	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	Board of Nursing	
roprietor, or employee, or served in any other profession	on, business, or other organization in which you or a family anal or advisory capacity, and from which any income in e eral retirement and/or disability benefits shall be included. (Use	excess of \$10,000 was derived during the preceding
Beth Israel Family Practice	, Seabrook, NH	
3 Brook 5 RT, 3SIDE 6	RT, POBOX 204 Greenland, NH	
you have no qualifying income indicate by writing your in		me does not qualify
1. Any profession, occupation, or business licer profession, occupation, or category of business:	n the general public: used or certified by the State of New Hampshire. List each su NU (Si NO)	ch
/ / Health (are Inclirance	Estate, including brokers, developers, and landlords 5. Banking or financial services	6. State of New Hampshire, county, or municipal employment
7. N.H. Retirement 8. Current use land assessment program		distribution of alcoholic 11. Practice of law
12. Any business regulated by the Public Utilities Commission	13. Horse or dog racing, or other legal forms of gambling	ucation 15. Water Resources
16. Agriculture 17. N.H. Business taxes: Profits Ta		tional: Specify any other area in which you have a special interest
have read RSA 15-A and hereby swear or affirm that the fo erson who knowingly fails to comply with the provisions	oregoing information is true and complete to the best of my of this chapter or knowingly files a false statement shall be g	knowledge and belief. RSA 15-A:9 Penalty. Any juilty of a misdemeanor.
Date 12 May 2027	Signature of Filer Werd	ly Staly for RECEIVE
V	f State 107 North Main Street State House Room 204 Conce	MAY 16 20

NEW HAMPSHIRE DEPARTMENT OF STATE