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

Type or	Print Clearly						į j					
Full Nar	ne Robin Co	mstock					Work Addre	ss O	ne Governmer	nt Way, Somerswortl	n, NH	
Primary	Occupation	Economic	Developme	nt	e-mail	rcomstock	@somerswor	h.com		Work Phone	603-692-	9516
Name the office, position, board or commission, board of directors, etc. or employment with state or county povernment held by you.  NO ACRONYMS					Board of Directors							
A. List I propriet	pelow the nan	ne, addre ree, or ser	ss, and type o	of any profession other profession	nal or advis	ory capacity	, and from w	hich ar	ny income in	ly member was an o excess of \$10,000 v e additional sheets	vas derived	during the preced
i.	N/A											
<b>!</b> .	N/A										* *************************************	<u></u>
f you ha	ive no qualifyi	ng incom	e indicate by	writing your in	itials next to	the following	ng statement.		My inco	ome does not qualify	, <u>F</u>	RAC )COS
eportal disciplin	ole special inte e a licensee or l effect on you	rest in an permitte or a fami	item on this e, or other de ly member th	list if a change i cision by gove an it would on	in law, a cha rnment affe the general	nge in admi cting the list public:	nistrative rule ed business, p	, a deci: professi	sion whether o	s, occupations, grou or not to award a coi n, group, or matter v	ntract, grant	a license or permit,
	1. Any prof- profession, o			ousiness license of business:	ed or certifie	ed by the Sta	te of New Hai	npshire	e. List each suc	sh		
2	. Health Care	3. Ir	nsurance			ding brokers and landlore	11 1	5. Banl ervices	king or financi		ate of New H	lampshire, county, ment
<b>\$</b>	'. N.H. Retirer ystem	nent		rrent use land ment program		9. Restau lodging	ırants/		10. Sale and beverages	distribution of alcol	nolic 🗀	11. Practice o law
	. Any business ities Commis		d by the Publ	11 1	13. Horse of gambling		), or other leg	l forms	14. Ed	ucation 15	. Water Reso	urces
1	6. Agriculture		17. N.H. taxes:	Business Profits Tax	I 1	iness erprise Tax	□ Interest Dividen		18. Op	ptional: Specify any of special interest	other area in	which you have a
										knowledge and beli guilty of a misdemea		i- <b>A:9 Penalty.</b> Any
Date	2-22-2021				4 2021	Signature	of Filer	Robin	A. Comstock	Koli	2.00	mstech
		D <sub>at</sub>	urn to: Office	DEPARTMEN	MPSHIRE VI.QF187A	John Main S	treet State Ho	nice Po	om 204 Conc	ord NH 03301		•

rn to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03 ELECT(UNS & SOS こんけっとう)