Type or	Print Clearly	2021 NEW HAMPSHI	RE STATEMENT OF	FINANCIAL IN	TERESTS - KSA T	5-A		
Full Nan			Work Address 6 Holland St, Moult			onborough, NH		
Primary	Occupation Assessor	e-mail thughes@moultonboroughnh.gov		Work Phone	603-476-2347	21 2022		
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			Current Use Advisory Board					RECE:
propriet	or, or employee, or serv	s, and type of any profess yed in any other professi nent benefits other than fea	onal or advisory capacit	ty, and from which	h any income in ex	cess of \$10,000 v	vas derived during	ciate, partner the preceding
١.	Thomas P. Hughes - Em	ployed by the Town of Mo	oultonborough					
2.	Joia R. Hughes - Compass Property Management - Managing Member							
f you ha	ave no qualifying income	indicate by writing your i	nitials next to the follow	ing statement.	My incom	e does not qualify	,	
eportak disciplin	ole special interest in an i ne a licensee or permittee	or a family member has a so tem on this list if a change e, or other decision by gov or member than it would o	e in law, a change in adm ernment affecting the lis	ninistrative rule, a	decision whether or r	not to award a cor	ntract, grant a license	e or permit,
X		cupation, or business licen or category of business:	sed or certified by the St NH Certified General			or Supervisor, NH	Real Estate Agent, L	andlords
_ 2	. Health Care 3. In:		ll Estate, including broke t, developers, and landlo		Banking or financial rices		ate of New Hampshi cipal employment	re, county, or
	7. N.H. Retirement ystem	8. Current use land assessment program	11	urants/	10. Sale and dis beverages	stribution of alcol	nolic 11 law	. Practice of
	. Any business regulated lities Commission	by the Public	13. Horse or dog racin of gambling	g, or other legal f	orms 14. Educa	ation 5	. Water Resources	
1	6. Agriculture	17. N.H. Business Profits Ta	1	Interest ar Dividends	11	onal: Specify any of special interest	other area in which y 	ou have a
have re	ead RSA 15-A and hereby who knowingly fails to co	swear or affirm that the formply with the provisions	oregoing information is t of this chapter or knowi	true and complete ingly files a false s	to the best of my kn atement shall be gui	owledge and beli lty of a misdemea	ef. RSA 15-A:9 Pe	nalty. Any
Date	September 20, 2022		Signatur	re of Filer		-	Thomas Hug	hes