	MPSHIRE STATEMENT OF FINA	NCIAL INTERESTS - RSA 15-A	Plana Camarasian
Type or Print Clearly	W 1 A 11	Southwest Region	Planning Commission pet Keene, NH 03431
ull Name Tim Murphy	Work Addre	SS 37775MUEIR 311	7(EENE, 1011 0373)
Primary Occupation Executive Diver	e-mail *optional		Work Phone 357-0557
The office, position, appointment, or employment with state government held by you. NO ACRONYMS	Public-Private Par	tnership Infrastructur	e Commission - Appointme
A. List below the name, address, and type of any proprietor, or employee, or served in any other parallel salendar year. Sources of retirement benefits other to the server of the serve	professional or advisory capacity, and	from which any income in excess of	\$10,000 was derived during the precedin
l			
2.			
f you have no qualifying income indicate by writin	g your initials next to the following sta	ement. My income does	not qualify
3. Indicate below whether you or a family member reportable special interest in an item on this list if a discipline a licensee or permittee, or other decision financial effect on you or a family member than it we have the control of the control	change in law, a change in administra by government affecting the listed bu vould on the general public:	tive rule, a decision whether or not to a siness, profession, occupation, group,	award a contract, grant a license or permit,
profession, occupation, or category of bus		Territorii pariire. Elatederi aderi	
2. Health Care 3. Insurance	4. Real Estate, including brokers, agent, developers, and landlords	5. Banking or financial services	6. State of New Hampshire, county, or municipal employment
7. N.H. 8. Current assessment	11 .	10. Sale and distribut beverages	ion of alcoholic 11. Practice of law
12. Any business regulated by the Public Utilities Commission	13. Horse or dog racing, or o of gambling	ther legal forms 14. Education	15. Water Resources
i i io. Adriculture i. i i	Business Business Profits Tax		pecify any other area in which you have a al interest
have read RSA 15-A and hereby swear or affirm the person who knowingly fails to comply with the pro-	at the foregoing information is true an ovisions of this chapter or knowingly fi	d complete to the best of my knowled es a false statement shall be guilty of a	misdemeanor.
Date 1/13/17		The Marphy	RECEIVED
		Signature of Reporting Individ	ual JAN 17 2017

NEW HAMPSHIRE