

Statement of Financial Interests PEASE DEVELOPMENT AUTHORITY (RSA 12-G:5)

F. LAMSON Name and address of reporting individual: d. Newinston.

1. Remunerative Business Association. List below the name, address and type of any professional, business, or other organization in which you were an officer, director, associate, partner, proprietor, or employee, or served in any other professional capacity, and from which you derived income in excess of \$10,000 during the preceding calendar year.

NA • Ь. C. 2. State-Associated Debt. List all debts as required by RSA 12-G:5 (b). (See reverse side for copy of law). f. 3. State-Associated Credit. List all credits as required by RSA 21-G:5 (b). (See reverse side for copy of law). Signature of Reporting Individual: anson Date: This report is for calendar year RETURN BY JULY 1 - To Secretary of State's Office, 107 North Main Street, State House Room 204, Concord, NH 03301

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