



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

RECEIVED  
JAN 27 2023  
NEW HAMPSHIRE  
DEPARTMENT OF STATE

Name and address of reporting individual: Karen S. Conard 30 Cate Street Unit 15 Portsmouth NH 03801  
(print)

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.

a. Director, The Savings Bank 357 Main Street, Wakefield MA 01880 (mutual bank)

b. \_\_\_\_\_

c. \_\_\_\_\_

2. State-Associated Debt. List all debts as required by RSA 12-G:5 (b). (See reverse side for copy of law).

d. N/A

e. \_\_\_\_\_

f. \_\_\_\_\_

3. State-Associated Credit. List all credits as required by RSA 21-G:5 (b). (See reverse side for copy of law).

g. N/A

h. \_\_\_\_\_

i. \_\_\_\_\_

Signature of Reporting Individual: [Signature] Date: 1/25/2023

This report is for calendar year 2022