2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

ype or Prii	nt Clearly		-		-			
ull Name	Kathleen A. B	izarro-Thunberg			Work Address	125 Airport Rd	, Concord, NH	03301
Primary Occ	cupation obbyist	<u>, </u>	e-mail	kbizarr	o@nhha.org	Į.	Work Phone	603-415-4252
lirectors, e		d or commission, board of t with state or county NO ACRONYMS		, NH Trai	uma Medical I	Review Committe	ee	
roprietor,	or employee, or ser		onal or advis	ory capacit	y, and from which	h any income in exc	ess of \$10,000 wa	ficer, director, associate, partner, as derived during the preceding necessary.)
· N	lew Hampshire	Hospital Association,	125 Airpo	rt Rd, Co	ncord, NH 03	3301		
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you have i	no qualifying incom	e indicate by writing your i	nitials next to	the followi	ng statement.	My income	e does not qualify	
reportable discipline a financial ef	special interest in ar a licensee or permitte ffect on you or a fam I. Any profession, o	item on this list if a chang	e in law, a cha vernment affe on the genera	ange in adn ecting the li Il public:	ninistrative rule, a sted business, pro	decision whether or fession, occupation,	not to award a con group, or matter w	os, or matters. A person has a tract, grant a license or permit, rould potentially have a greater
2. He	ealth Care 3. In		l Estate, includ , developers,			Banking or financial		e of New Hampshire, county, or pal employment
7. N.I Syste	H. Retirement em	8. Current use land assessment program		9. Restai	urants/	10. Sale and dis	tribution of alcoho	olic 11. Practice of law
	y business regulated S Commission	d by the Public	13. Horse o of gambling	r dog racing	g, or other legal fo	orms 14. Educa	tion 15. V	Vater Resources
	griculture	17. N.H. Business taxes: Profits Ta	x Ente	iness rprise Tax	Interest an Dividends	Гах	special interest	her area in which you have a
nave read I erson who	RSA 15-A and hereby knowingly fails to co	y swear or affirm that the fo omply with the provisions !	oregoing info of this chapte	mation is to	rue and complete ngly files a false st	to the best of my kno atement shall be guil	owledge and belief ty of a misdemean	F. RSA 15-A 9-Penalty Any or. RECEIVE
Date 12	2/21/21			Signature	e of Filer	getten S. B	Jano-1)	LUSEL NEW HAMPSHIP DEPARTMENT OF S