## 2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Date 1-4-0 yo
I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.
16. Agriculture taxes: Profits Tax Enterprise Tax Dividends Tax 18. Optional: Specify any other area in which you have a special interest
12. Any business regulated by the Public
7. N.H. Retirement B. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic law law
2. Health Care 3. Insurance 4. Real Estate, including brokers, agent, developers, and landlords 5. Banking or financial 6. State of New Hampshire, county, or services municipal employment
1. Any profession, occupation, or business licensed <u>or certified by the State of New Hampshire</u> . List each such profession, occupation, or category of business:
B. Indicate below whether you or a family member has a special interest in any of the following businesses, professions, occupations, groups, or matters. A person has a reportable special interest in an item on this list if a change in law, a change in administrative rule, a decision whether or not to award a contract, grant a license or permit, discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a greater financial effect on you or a family member than it would on the general public:
If you have no qualifying income indicate by writing your initials next to the following statement.  My income does not qualify
2.
1. Oracle, Scath Washington, CAllison Key Nallow, Spook)
A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was an officer, director, associate, partne proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was derived during the precedin calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you.  NO ACRONYMS
Primary Occupation Executiva Director e-mail James Kwentstan work Phone 603,415,0191
Full Name James Key-Wallace WorkAddress 2 Pillsbury St. Svite 201 (dn(w21/H0530)

Return to: Office of Secretary of State, 107 North Many Street, State House Room 204, Concord, NH 03301