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

Type or Print Clearly				
Full Name Michael Carignon	Work Address 28 officer Jaws Rock Drive, Nashin, NH osol	4		
Primary Occupation Chief of Police	e-mail Carignumenshuepd.com Work Phone 603.594.2610			
Name the office, position, board or commission, board of directors, etc. or employment with state or county				
government held by you. NO ACRONYMS				

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, partner, 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 preceding calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)

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if you h	ave no qualifying income indicate by writing your initials next to the following statement.	My income does not qualify	

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:

		sion, occupation, or b upation, or category (		ified by the State of New H	ampshire. Li		(Apples to a	# 14 as well)
<u> </u>	2. Health Care	3. Insurance	4. Real Estate, inc agent, develope	rs, and landlords	5. Banking services	or financial	6. State of N municipal en	ew Hampshire, county, or pployment
	7. N.H. Retirement 8. Current use land System			9. Restaurants/		. Sale and distribution verages	on of alcoholic	11. Practice of law
	12. Any business regulated by the Public 13. Hors   Utilities Commission			e or dog racing, or other le ng	gal forms	14. Education	📋 15. Water I	Resources
E 16 Agriculture		17. N.H. taxes:			est and ends Tax	- 18. Optional: Sp special	ecify any other an interest	ea in which you have a

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.

Signature of Filer

FEB 09 202

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

NEW HAMPSHIEL