2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A										
Type or Print Clearly	New London Hospital									
Full Name Catherine Bardier	Work Address 273 County Rd, New London, NH									
Primary Occupation Diector Cormunity e-mail Cathe	ine bardier a Work Phone (203/526-593									
Name the office, position, board or commission, board of	snaan hospital. org									
directors, etc. or employment with state or county government held by you. NO ACRONYMS	ernors Concil on Physical Activity & Health									

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.)

1. New London Hos 2. If you have 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:

	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:										
					Real Estate, including brokers, 5. B ent, developers, and landlords service			ing or financial	6. State of New Hampshire, county, or municipal employment		
.	7. N.H. Retirement System		urrent us sment pro		9. Resta lodging	urants/	11 .	10. Sale and distribu beverages	ition of alcoholic	☐ 11. Practice of law	
12. Any business regulated by the Public 13. Horse or dog racing, or other legal forms 14. Education 15. Water Resources Utilities Commission 15. Water Resources 15. Water Resources											
	16. Agriculture	17. N.H. taxes:	•		Business nterprise Tax	Dividen			Specify any other are ial interest	a 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.

Date

Signature of Filer

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