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

Type or Print Clearly

| Full Name | | Work Address | | | | | | |
|---|--------|--------------|--|------------|--|--|--|--|
| Primary Occupation | e-mail | | | Work Phone | | | | |
| 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.)

| 1. | |
|----|--|
| 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: | | | | | | | | | | | | |
|------------------------------|---|---------------------|--|--|---|--|--|---|---------------|---------------------|---|--|--|
| | 2. Health Care | Care 🗌 3. Insurance | | | 4. Real Estate, including brokers, agent, developers, and landlords | | | 5. Banking or financ services | | financial | 6. State of New Hampshire, count municipal employment | | |
| 7. N.H. Retirement System | | | | | | | 10. Sale and distribution of alcoholic beverages | | | | 11. Practice of law | | |
| | 12. Any business regulated by the Public Utilities Commission | | | | 13. Horse or dog racing, or other legal forms of gambling | | | | 14. Education | 15. Water Resources | | | |
| 16 Agriculture | | | | iness 🛛 Business 🔲 Interest and Fits Tax 🖾 Enterprise Tax 🖾 Dividends Tax | | | | 18. Optional: Specify any other area in which you have a special interest | | | | | |

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