

**2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A**

Type or Print **Clearly**

Full Name Sawako T. Gardner Work Address Circuit Court

Primary Occupation Judge e-mail \*optional sgardner@courts.state.nh.us Work Phone \_\_\_\_\_

Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS:  
New Hampshire Police Standards and Training Council.

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. Teacher Portsmouth High School
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:

|   |   |   |   |  |  |
|---|---|---|---|--|--|
| <input checked="" type="checkbox"/> 1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: <u>Education, Judiciary</u> |   |   |   |  |  |
| <input type="checkbox"/> 2. Health Care   | <input type="checkbox"/> 3. Insurance   | <input checked="" type="checkbox"/> 4. Real Estate, including brokers, agent, developers, and landlords | <input type="checkbox"/> 5. Banking or financial services                 | <input checked="" type="checkbox"/> 6. State of New Hampshire, county, or municipal employment |  |
| <input checked="" type="checkbox"/> 7. N.H. Retirement System   | <input checked="" type="checkbox"/> 8. Current use land assessment program  | <input type="checkbox"/> 9. Restaurants/ lodging  | <input type="checkbox"/> 10. Sale and distribution of alcoholic beverages | <input checked="" type="checkbox"/> 11. Practice of law  |  |
| <input type="checkbox"/> 12. Any business regulated by the Public Utilities Commission  |   | <input type="checkbox"/> 13. Horse or dog racing, or other legal forms of gambling                      |   | <input type="checkbox"/> 14. Education   | <input type="checkbox"/> 15. Water Resources |
| <input type="checkbox"/> 16. Agriculture  | 17. N.H. taxes: <input type="checkbox"/> Business Profits Tax <input type="checkbox"/> Business Enterprise Tax <input checked="" type="checkbox"/> Interest and Dividends Tax | <input type="checkbox"/> 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.

**RECEIVED**

Date 10/25/18

Sawako T. Gardner  
Signature of Reporting Individual

OCT 29 2018

NEW HAMPSHIRE  
DEPARTMENT OF STATE