2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or	Print Clearly			•			
Full Na	me Wallace R Stevens			Work Address	85 New Hampshire:	Ave, Suite 200, P	ortsmouth, NH 03801
Primary Occupation Management			e-mail wally@seafoodassurances.org Work Pho			Work Phone	6033363900
Name the office, position, board or commission, board of directors, etc., or employment with state or county government held by you. NO ACRONYMS			Trustee - University Sys	tem of New Hamp	oshire .		
proprie	tor, or employee, or ser	s, and type of any professived in any other professionent benefits other than feder	nal or advisory capacit	y, and from whic	h any income in exc	ess of \$10,000 v	officer, director, associate, partner, was derived during the preceding as necessary.)
1.	Global Aquaculture Alliance - 85 New Hampshire Ave, Suite 200, Portsmouth, NH 03801						
2.	Sara Lee Corporation Pension						
lf you h	ave no qualifying income	e indicate by writing your in	itials next to the followi	ng statement.	My income	does not qualify	
reporta discipli	ble special interest in an ne a licensee or permitte il effect on you or a famil	item on this list if a change	in law, a change in adm rnment affecting the lis the general public:	inistrative rule, a cated business, prof	decision whether or netersion, gettings, getti	ot to award a cor roup, or matter v	ps, or matters. A person has a ntract, grant a license or permit, vould potentially have a greater
	2. Health Care 3. In		Estate, including broke developers, and landlo		Banking or financial vices	J muni	ate of New Hampshire, county, or cipal employment
1	7. N.H. Retirement ystem	8. Current use land assessment program	9. Resta	urants/	10. Sale and dis beverages	tribution of alcol	nolic 11. Practice of law
	2. Any business regulated lities Commission	l by the Public	13. Horse or dog racin of gambling	g, or other legal fo	175,2000		. Water Resources
Γ :	16. Agriculture	17. N.H. Business taxes: Profits Tax	Business Enterprise Tax	Interest ar Dividends		nal: Specify any o special interest –	other area in which you have a
I have re person	ead RSA 15-A and hereby who knowingly fails to co	v swear or affirm that the foomply with the provisions	regoing information is t of this chapter or knowi	rue and complete ngly files a false st	to the best of my kno atement shall be guil	owledge and beli ty of a misdemea	ef. RSA 15-A:9 Penalty. Any nor. RECEIVED
Date	January 6, 2020		<u> </u>) plan (nature of Reporting Ir	ndividual	JAN 1 6 2020 NEW HAMPSHIRE
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Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301