2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly
Full Name Marcia Alma Mª Caffrey Work Address Dept. of Education, Concord, No
Primary Occupation Education Consultant e-mail marcia. R. mccaffrege doe. L. Work Phone 603-271-319
Name the office, position, board or commission, board of Education Consultant, NH Dept. of Education directors, etc. or employment with state or county
government held by you. NO ACRONYMS Advisor NH Music Education Assoc + NH Art Educators Ass
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, 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 pre calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)
1. State of New Hampshire
Wellfleet Insurance Company
3. New Hompshire Refirement System If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify
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 3. Insurance 4. Real Estate, including brokers, agent, developers, and landlords services 5. Banking or financial services 6. State of New Hampshire, cour
7. N.H. Retirement 8. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic law
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms 14. Education 15. Water Resources
16. Agriculture 17. N.H. Business Business Business Interest and Dividends Tax 18. Optional: Specify any other area in which you have 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. A 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 March 27, 2022 Signature of Filer Marcia a. McCeffrey MAR 3
MAR 3

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

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