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

Type or Print	Clearly	,					1	
Full Name	MARC I	SROWN		Work Address	AN 22	Pleasant	St Newfalts, M.	(353)
Primary Occup	pation Cons	11mt/166575,	7 e-mail	m brown@consu	merenersy alliance.or	Work Phone	603-777-7176	
	. or employmen	d or commission, board o t with state or county NO ACRONYMS	Commis	ssion to investig	afe the impl	lewente ba	of next	
proprietor, or	employee, or ser	ved in any other profess	ssion, business, e sional or advisor	or other organization in v	vhich you or a family` ich any income in ex	member was an off ccess of \$10,000 wa	icer, director, associate, partner, s derived during the preceding	1
1. Ao	dvantage (1 soverwart A	Hairs,	Po Box BUR!	258, Carca	ed, NH as	\$ 0302 Lobis	Cash,
2. \mathcal{U} If you have no	BW Kaso	e indicate by writing your	ZII Nor	Sile St. Hu	vs by, TX	77098 /	Sobje Cassky	
reportable spe discipline a lic financial effec	ecial interest in ar censee or permitte ct on you or a fam	nitem on this list if a chan ee, or other decision by go ly member than it would	ge in law, a char overnment affec on the general	nge in administrative rule, ting the listed business, p	a decision whether or rofession, occupation	r not to award a con , group, or matter w	s, or matters. A person has a tract, grant a license or permit, ould potentially have a greater	
1 1		n, or category of business						
2. Healt	h Care 3. In	STITATION ILLEGATION	al Estate, includi nt, developers, a	- 1	5. Banking or financial ervices	11 1	e of New Hampshire, county, or pal employment	
7. N.H. System	Retirement	8. Current use lar assessment progra	5	9. Restaurants/ lodging	10. Sale and d beverages	istribution of alcoho	lic 11. Practice of law	
	ousiness regulated Commission	by the Public	13. Horse or of gambling	dog racing, or other legal	L 14. Educ		Vater Resources	
16. Agri	culture	17. N.H. Busines taxes:	Ss Susir Fax Enter	ness Interest prise Tax Dividend		ional: Specify any ot special interest —	her area in which you have a	
I have read RSA person who kn	A 15-A and hereby lowingly fails to co	swear or affirm that the omply with the provision	foregoing inforr s of this chapter	nation is true and comple or knowingly files a false	te to the best of my k statement shall be gu	nowledge and belief uilty of a misdemean	f. RSA 15-A:9 Penalty. Any or.)
Date 10	-6-2027		The state of the s	Signature of Filer	\mathcal{A}	Sh	OCT 11 2022	
	Reti	urn to: Office of Secretary	of State 107 No	orth Main Street, State Ho	use Room 204, Concoi	rd, NH 03301	NEW HAMPSHIRE DEPARTMENT OF STA	