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

Type or Print Clearly	· · · · · · · · · · · · · · · · · · ·						
Full Name LINDA TATARCZUCH	Work Address 5 Fitts Farm Drive DURHAM, NH 03824						
Primary Occupation RETIRED e-mail LMT	97AR@BMAIL: COM Work Phone 603 8685515						
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you.  NO ACRONYMS	ire Board of Medicine - Board Member						
A. List below the name, address, and type of any profession, business, or other o proprietor, or employee, or served in any other professional or advisory capacity calendar year. Sources of retirement benefits other than federal retirement and/or disc	rganization in which you or a family member was an officer, director, associate, partner, y, and from which any income in excess of \$10,000 was derived during the preceding ability 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 followi	ng 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 3. Insurance 4. Real Estate, including broker agent, developers, and landlor							
7. N.H. Retirement 8. Current use land 9. Restaution lodging	urants/  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 of gambling	g, or other legal forms 14. Education 15. Water Resources						
16. Agriculture 17. N.H. Business Business Enterprise Tax	Interest and 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 to person who knowingly fails to comply with the provisions of this chapter or knowing the provisions of the chapter or knowing the chapter of	rue and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any ngly files a false statement shall be guilty of a misdemeanor.						
Date	JAN 1 4 2021						
Return to: Office of Secretary of State, 107 North Main S	Signature of Reporting Individual  NEW HAMPSHIRE  DEPARTMENT OF STATE						

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Full Name	LINDA TAT	ARCTUCH	THE TAXABLE AND ADDRESS OF THE PARTY OF THE	Work Address	6 Fitts Fal	in Drive, Dr	WHAM, NH 03824 6038686515
Primary Occ	cupation Ret	rred	e-mail LMT/	ATAR40 CG	MAIL. COM	Work Phone	6038685515
directors, e		d or commission, board of t with state or county NO ACRONYMS	New Hamps	hire Board	d of Denta	/ Examiner	Board Member
proprietor,	or employee, or ser	es, and type of any professived in any other professionent benefits other than feat	onal or advisory capaci	ty, and from which	h any income in ex	cess of \$10,000 was	cer, director, associate, partner, derived during the preceding necessary.)
1.			Takes programmen personal and a second and a	A LOCAL CONTRACTOR AND A LABORATE MARKET MAR	III inimi menumena termina dalah MANGANG MAJASA di pagan Masantal Banas		
2.							
If you have	no qualifying income	e indicate by writing your i	initials next to the follow	ring statement.	My incom	e does not qualify	
reportable s discipline a financial eff	special interest in an licensee or permitte ect on you or a famil	item on this list if a change	e in law, a change in adn vernment affecting the li n the general public:	ninistrative rule, a c sted business, prof	decision whether or ession, occupation,	not to award a contr group, or matter wo	or matters. A person has a act, grant a license or permit, uld potentially have a greater
8		, or category of business:	sed of certified by the 5	Tate of New Hallips	mre. Lisceacii sucii		
2. H€	ealth Care 3. In	ICUPANCA II	l Estate, including broke t, developers, and landlo		Banking or financial ices		of New Hampshire, county, or bal employment
7. N. Syste	H. Retirement em	8. Current use land assessment program	A CONTRACTOR OF THE CONTRACTOR	aurants/	10. Sale and di beverages	stribution of alcohol	ic 11. Practice of law
	ny business regulated s Commission	by the Public	13. Horse or dog racin of gambling	ng, or other legal fo	orms 14. Educ	ation 15. W	ater Resources
<u> </u>	Agriculture	17. N.H. Business Profits Taxes:		Interest an Dividends		onal: Specify any oth special interest —	ner area in which you have a
I have read person who	RSA 15-A and hereby knowingly fails to c	y swear or affirm that the food omply with the provisions	oregoing information is of this chapter or know	true and complete ingly files a false st	to the best of my kr atement shall be gu	owledge and belief. Ity of a misdemeand	RSA 15-A:9 Penalty. Any or.  JAN 1
Date _	Januar -	1/2021	C	Linda	hature of Reporting	Individual	NEW HAMPSHIRE
	Ret	urn to: Office of Secretary	of State, 107 North Main	Street, State House	e Room 204, Concor	d, NH 03301	WENT OF CT