

2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERFSTS - RSA 15.A

Type or P	rint Clearly			بين ۱۱۰ د ۱۳۰۰	ACTIVITY HIS	(CRES13-RSA 13	- A		
Full Name	ame Kirnothy C Griffin			Work Address		53 Regional Drive, Suite 200, Concord NH 03301			
Primary O	ccupation Investiga	tor	— e-mail	kimothy.cgriffin	@banking.r	nh.gov	Work Phone	6032718505	<u> </u>
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			Real Estato A	ppraiser Board					
calendary	, or emproyee, or se	ss, and type of any profession rved in any other profession ment benefits other than fede	nai or activisc	rv capacity, and 1	from which	any income in eve	«« ለፋ ¢10 ሰበበ		ite, partne : precedir
1.					-				
2.									
If you have	no qualifying incom	e indicate by writing your in	itials next to t	he following state	ement	My income o	does not qualify	kcg	
discipline a financial el	special interest in an ilicensee or permitte fact on you or a famil	or a family member has a spe item on this list if a change i e, or other decision by gove y member than it would on	n law, a chan rument affect the general p	ge in administrati ing the listed busi oublic: 	ve ruie, a de iness, profe	ecision whether or not ession, occupation, gro	t to sucord a com		• · · ·
Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:									
			state, Includi Jevelopers, ar		– 5. Bi service	anking or financial		te of New Hampshire,	ounty, or
Syst		8. Current use land assessment program		9. Restaurants/ lodging		 Sale and distribeverages 	ibution of alcoho	olic - 11. Pr	actice of
	ny business regulated s Commission	7 71	13. Horse or of gambling	dog racing, or oth	er legal for	ms 14. Educatio	on 15.\	Vater Resources	
16.7	Agriculture	17. N.H. Business Profits Tax	Busin Enterp		nterest and Ividends Ta	18. Optiona	l: Specify any ot ecial interest	her area in which you	have a
l have read person who	RSA 15-A and hereby knowingly fails to co	swear or affirm that the for emply with the provisions of	egoing inform f this chapter	nation is true and o or knowingly files	complete to s a false stat	o the best of my know tement shall be guilty	rledge and belle of a misdemean	RSA 15-A:9 Penaltor.	y. Any
Date 12	January 2021			Signature of Filer	5	Elman		 ,	

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