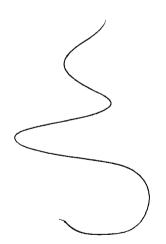
2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	· · · · · · · · · · · · · · · · · · ·		-,				
Full Name Au	IN EI BACCY	In.	Work Address	N.H.VET	CRANS	Hone,	TTCTUMAN,
Primary Occupation	RETIRED	e-mail	. ,	1	Work Phone		
	n, board or commission, board of loyment with state or county i. NO ACRONYMS	N.H. VG	ERANS	Home:	MCROW. A	<i>2.1√-</i>	
proprietor, or employee	, address, and type of any professi e, or served in any other profession of retirement benefits other than fede	nal or advisory capacit	ty, and from whic	h any income in e	xcess of \$10,000 w	as derived duri	issociate, partner, ng the preceding
1.							
2.				· · · · · · · · · · · · · · · · · · ·			The second secon
If you have no qualifying	income indicate by writing your in	itials next to the follow	ing statement.	My incor	ne does not qualify		
reportable special interdiscipline a licensee or professional effect on your control of the cont	her you or a family member has a sest in an item on this list if a change permittee, or other decision by gover a family member than it would one solution, occupation, or business licentupation, or category of business:	e in law, a change in adr ernment affecting the line the general public:	ninistrative rule, a isted business, pro	decision whether of fession, occupation	r not to award a con n, group, or matter v	ntract, grant a lic	cense or permit,
2. Health Care	3 Insurance 4. Real	Estate, including broke developers, and landlo		Banking or financia		ate of New Ham Cipal employme	pshire, county, or nt
7. N.H. Retireme System	8. Current use land assessment program		urants/	10. Sale and o	listribution of alcoh	oolic	11. Practice of law
12. Any business re Utilities Commission	gulated by the Public	13. Horse or dog racin of gambling	ng, or other legal fo	14. Edd	· L	Water Resource	
16. Agriculture	17. N.H. Business taxes: Profits Tax	Business Enterprise Tax	Interest an Dividends	11 1	ional: Specify any o special interest –	other area in wh - -	ich you have a
l have read RSA 15-A and person who knowingly f	I hereby swear or affirm that the fo ails to comply with the provisions	regoing information is of this chapter or know	true and complete ingly files a false st	to the best of my later lent shall be g	copwledge and beli uilty of a misdemea		Penalty. Any
Date ////9	12022	Signatu	re of Filer	Cla	m	NEW	V 1 7 2022 HAMPSHIRE MENI OF STATE



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