## 2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	D ALANT	1446R	NA/-	rk Address					
Full Name	D ALAN TI retire	0					Marile Dhana		
Primary Occupation _	retire	eac	e-mail *option	1a1	<del></del>	··	Work Phone –		
Name the office, posit directors, etc. or empl by you. NO ACRONYM	oyment with state o			NTWOR	274 C	0041 b 6E	Com	miss	on_
roprietor, or employe	ee, or served in any	other profession	on, business, or other nal or advisory capac ral retirement and/or d	ity, and from v	vhich any inc	ome in excess of	\$10,000 was de	rived durin	
pore	· · · · · · · · · · · · · · · · · · ·		,						
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you have no qualifyir	ng income indicate by	writing your ini	tials next to the follow	ving statement		My income does n	ot qualify	Do	1
eportable special inter	est in an item on this permittee, or other de	list if a change i ecision by gover	ecial interest in any of n law, a change in adn nment affecting the li the general public:	ninistrative rule	, a decision w	hether or not to av	vard a contract,	grant a lice	nse or permit,
	ssion, occupation, or cupation, or category		ed or certified by the St	tate of New Ha	mpshire. List	each such			
2. Health Care	3. Insurance		state, including broke developers, and landlo		5. Banking o ervices	r financial	<ul> <li>6. State of municipal e</li> </ul>		hire, county, or
7. N.H. Retirem System		rrent use land ment program	9. Resta lodging	aurants/	10. 5 beve	iale and distributio rages	n of alcoholic	11 1	11. Practice of w
12. Any business r Utilities Commissi	egulated by the Publ on		13. Horse or dog racin f gambling	ng, or other leg	al forms	14. Education	15. Water	Resources	
16. Agriculture	17. N.H. taxes:	Business Profits Tax	Business Enterprise Tax	Interes Dividen		18. Optional: Spe special i	cify any other a nterest	rea in which	ı you have a
ave read RSA 15-A an	d hereby swear or aff fails to comply with th	rm that the fore ne provisions of	egoing information is t f this chapter or knowi	true and comp ingly files a fals	ete to the bes e statement s	it of my knowledge hall be guilty of a m	and belief. R	SA 15-A:9 P	<b>Penalty.</b> Any

Date June 8, 2018

Manus Clan Jaylor Signature of Reporting Individual RECEIVED

JUN 13 2018

NEW HAMPSHIRE DEPARTMENT OF STATE