

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

Type or Print Clearly

Full Name: Julie W. Dunand

Work Address: 61 West Shore Road, Bristol, NH 03022-3771

Primary Occupation: Licensed Clinical Mental Health Counselor

Name the office, position, board or committee, board of directors, etc. or employment with state or county government held by you.

Member - Citizen's Advisory Board, NH Department of Corrections
 Member - Citizen's Advisory Board, New Hampshire State Prison for Men (NHSPM)

A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was an officer, director, partner, proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was derived during the preceding calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)

1. Teladoc Health Medical Group, P.A. 1945 Lawpointe Drive, Lewisville, TX 75057

If you have no qualifying income indicate by writing your initials next to the following 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:		NH Board of Mental Health Practice - Licensed Clinical Mental Health Counselor (LCMHC) #117		
2. Health Care	3. Insurance	4. Real Estate, including brokers, agent, developers, and landlords	5. Banking or financial services	6. State of New Hampshire, county, or municipal employment
7. NH Retirement System	8. Current use land assessment program	9. Restaurants/Lodging	10. Sale and distribution of alcoholic beverages	11. Practice of law
12. Any other matter regulated by the Public Utilities Commission	13. Horse or dog racing, or other legal forms of gambling	14. Education	15. Water Resources	
16. Agriculture	17. NH Business Profits Tax	18. Business Enterprise Tax	19. Interest and Dividends Tax	18. Optional: Specify any other area in which you have a special interest

I hereby declare under oath or affirm that the foregoing information is true and complete to the best of my knowledge and belief. RSA 15-A:3 Penalty. Any person who files a false statement shall be guilty of a misdemeanor.

JAN 13 2021
 NEW HAMPSHIRE
 DEPARTMENT OF STATE

Robert Dunand
 Signature of Reporting Individual