

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

Type or Print Cle	arly	IATEMENT O	T IIIVII QUINTI III	TERREDIE ROR		
Full Name	Kenneth R. Dunn		Work Address	27 Hazei	n Drive, Concord,	NH 03301
Primary Occupation Deputy Commissioner, Dept of IT e-mail		e-mail Ken	Kenneth R.Dunn@doit.nh.gov		Work Phone	(603) 223-5738
	position, board or commission, board of remployment with state or county by you. NO ACRONYMS	Deputy (Commissioner, N	IH Department o	of Information Tec	hnology
proprietor, or em	name, address, and type of any profession, b ployee, or served in any other professional o purces of retirement benefits other than federal re	r advisory capac	ity, and from which	h any income in e	xcess of \$10,000 was	derived during the preceding
1.	None		22			
2.						1
If you have no qua	alifying income indicate by writing your initials	next to the follow	wing statement.	My incor	ne does not qualify	krd
reportable special discipline a license	whether you or a family member has a special l interest in an item on this list if a change in lav ee or permittee, or other decision by governme you or a family member than it would on the	v, a change in ad ent affecting the	ministrative rule, a	decision whether or	not to award a contra	act, grant a license or permit,
1. Any profession	profession, occupation, or business <u>licensed or</u> on, occupation, or category of business:	certified by the S None	State of New Hamp	shire. List each such	36 35 12 13 13 13 13	
☐ 2. Health C		e, including brok lopers, and landl		Banking or financial		of New Hampshire, county, or al employment
7. N.H. Res	tirement 8. Current use land assessment program	9. Resi	taurants/	10. Sale and o beverages	listribution of alcohol	ic 11. Practice of law
T 12, Any busi Utilities Com		Horse or dog raci mbling	ng, or other legal fo	orms 14. Educ	cation T 15. W	ater Resources
16. Agricul	ture 17, N.H. Business taxes: Profits Tax	Business Enterprise Tax	Interest an Dividends		ional: Specify any oth special interest —	er area in which you have a
I have read RSA 15 person who know	5-A and hereby swear or affirm that the foregoi ringly fails to comply with the provisions of this	ng information is s chapter or know	true and complete vingly files a false st	to the best of my k atement shall be gu	nowledge and belief. uilty of a misdemeano	RSA 15-A:9 Penalty. Any r.
Date	1/11/2021	-	Sigi	nather C. Sur.	سمه Individual	

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