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

Type or	Print Clearly				
Fuli Nam	e William T. Conway	Work Address	1 Minuteman Way, Concord, N	H 03301	
Primary (Occupation Army Officer	e-mail bill891@verizon.net	Work Pho	one 603-	225-1270
directors,	e office, position, board or commission, board of , etc. or employment with state or county ent held by you. NO ACRONYMS	NH Veterans Home Board of Managers			
proprieto	elow the name, address, and type of any profess or, or employee, or served in any other profession year. Sources of retirement benefits other than fed	onal or advisory capacity, and from which	h any income in excess of \$10,0	000 was deri	ved during the preceding
	NH National Guard				
-					
you hav	re no qualifying income indicate by writing your in	nitials next to the following statement.	My income does not qu	ualify	
eportabli iscipline nancial (te below whether you or a family member has a special interest in an item on this list if a change a licensee or permittee, or other decision by government on you or a family member than it would on a family member than it would on the control of	In law, a change in administrative rule, a cernment affecting the listed business, prof the general public:	lecision whether or not to award ession, occupation, group, or mat	a contract, g	rant a license or permit.
2.		Estate, including brokers, 5. I developers, and landiords serv		5. State of Ne nunicipal em	w Hampshire, county, or ployment
	N.H. Retirement 8. Current use land assessment program	– 9. Restaurants/ – lodging	 Sale and distribution of a beverages 	lcoholic	11. Practice of law
		13. Horse or dog racing, or other legal fo of gambling	rms 14. Education	15. Water R	esources
16.	Agriculture 17. N.H. Business Profits Tax	Business Interest and Enterprise Tax Dividends T	d 18. Optional: Specify a special interes	nny other are	a in which you have a
iave rea erson wi	d RSA 15-A and hereby swear or affirm that the form thou the form of knowingly fails to comply with the provisions of	regoing information is true and complete of this chapter or knowingly files a false sta	to the best of my knowledge and stement shall be guilty of a misde	belief. RS/ meanor.	15-A:9 Penalty, Any RECEIVE
ate 1	/14/21	Signature of Filer	Mm I	W	JAN 1 5 2021

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

NEW HAMPSHIRE DEPARTMENT OF STATE