2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

| Type or Print Clearly | , |
|--|---------------|
| Full Name Jeanne F. Donohoe Work Address 73 May John Dr Keen H | -03 |
| Primary Occupation RN e-mail Seanue donore @ amail. Com Work Phone (63) 545-44 | 40 |
| Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS Read of Dursing | |
| 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, associate, participation, 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 precedendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.) | |
| 1. North cost Thormany Sining rante Place Con and, NH 03301 | |
| 2. State of NH netinement | |
| 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 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 perm discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a great 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: | nit, |
| 2. Health Care 3. Insurance 4. Real Estate, including brokers, agent, developers, and landlords services 5. Banking or financial services 6. State of New Hampshire, count municipal employment | ty, or |
| 7. N.H. Retirement System 8. Current use land lodging 10. Sale and distribution of alcoholic beverages 11. Practice beverages | e of |
| 12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms Utilities Commission 14. Education 15. Water Resources | |
| 16. Agriculture 17. N.H. taxes: Business Profits Tax Business Enterprise Tax Dividends Tax Dividends Tax 18. Optional: Specify any other area in which you have special interest— | a |
| I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. Person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor. RECEIVED Date 19/19/19 Date 18/19/19 Date 18/19/19 Date 18/19/19 Date 18/19/19 Date Da | ny |
| Signature of Reporting Individual DEU 2 0 2019 | |

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

NEW HAMPSHIRE DEPARTMENT OF STATE