2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	·	. ·	
Full Name Michael John Blair	Work Address	/A	
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is a second amont with state or county		soly Council on	
government held by you. NO ACRONYMS 5つんかつ		nd Prevention	
A. List below the name, address, and type of any profession, business, or oth proprietor, or employee, or served in any other professional or advisory cap calendar year. Sources of retirement benefits other than federal retirement and/o	acity, and from which any	income in excess of \$10,000 was de	silved during the preceding
1. MS Intenational Inc - 2095	N. Batavia	a St arange CA	92865
2 Home Dopot USA Inc 2455	Paces Evry Rd	Atlanta GA 30339	
If you have no qualifying income indicate by writing your initials next to the fol	•	My income does not qualify	MJB
B. Indicate below whether you or a family member has a special interest in any reportable special interest in an item on this list if a change in law, a change in discipline a licensee or permittee, or other decision by government affecting the financial effect on you or a family member than it would on the general public of the profession, occupation, or business licensed or certified by the profession occupation or category of business:	administrative rule, a decision to the listed business, profession	on whether or not to award a contract, occupation, group, or matter would	t, grant a license of permit,
profession, occupation, or eategory or admitted	, La C.D. Lin		New Hampshire, county, or
2. Health Care 3. Insurance 4. Real Estate, including br		- 11 I	employment
7. N.H. Retirement 8. Current use land 9. R System assessment program lodgi	estaurants/ 1 ng b	0. Sale and distribution of alcoholic everages	11. Practice of law
12. Any business regulated by the Public 13. Horse or dog r Utilities Commission of gambling	acing, or other legal forms		er Resources
17. N.H. Business Business taxes: Profits Tax Enterprise	Interest and Dividends Tax	18. Optional: Specify any other special interest —	area in which you have a
I have read RSA 15-A and hereby swear or affirm that the foregoing information person who knowingly fails to comply with the provisions of this chapter or knowing the provisions of the chapter or knowing the complex of the chapter or knowing the complex of the chapter or knowing the chapter of the chapter o	n is true and complete to the owingly files a false stateme	e best of my knowledge and belief. ent shall be guilty of a misdemeanor.	RSA 15 PPEOFICED
			DEC 0 9 2022
Date 11/28/2012 Sign	ature of Filer M	notael exerc	NEW HAMPSHIRE DEPARTMENT OF STATI

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Type or Print Clearly			
Full Name Michael John Blair - Page 2 Work Address N/A			
Primary Occupation Han School Student e-mail Michaelblau 10 Qiclaud ConWork Phone WA			
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS GOVERNOOFS GOVE			
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, 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. TENN AND TENN, DO 16 High St Mancheger NH 03101			
2 99 Hanover Street UC 16 High St Manchester NH 03101			
If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify MJB			
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:			
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, county, or municipal employment			
7. N.H. Retirement 8. Current use land ssystem 9. Restaurants/ lodging 10. Sale and distribution of alcoholic law			
12. Any business regulated by the Public 13. Horse or dog racing, or other legal forms Utilities Commission 14. Education 15. Water Resources			
16. Agriculture 17. N.H. Business Business Interest and pividends Tax Business Business Interest Inte			
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. RSA 15-A9 Penalty Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.			
DEC 0 9 2022			
Date 11 28 2022 Signature of Filer Withhelf State NEW HAMPSHIFE			