

JAN 1 3 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

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

Type or P	rint Clearly							··-				
Full Name	ll Name Erika Randmere				w	/ork Address	45 S	outh Fruit Street,	Concord, NH 0	3301		
Primary O	ccupation Governm	ent		e-mail	erika.randme	re@nhes.nh.	gov	,	Work Phone	603-223-6	150	
Name the office, position, board or commission, board of directors, etc. or employment with state or county												
	ent held by you.											
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.	New Hampshire Department of Employment Security, 45 South Fruit Street, Concord, NH 03301, State Government Agency											
2.												
If you have	e no qualifying Incom	e indicate by	writing your it	nitials next to	the following s	statement.		My income de	es 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:												
Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:												
2. H	Health Care 3. In	nsurance		Estate, includ , developers, a			. Bankir rvices	g or financial	IIVI	ate of New Hi	empshire, county	, or
[X]	N.H. Retirement item	11 1	irrent use land ment program	11 1	9. Restaurar lodging		-1 ·	0. Sale and distrib everages	oution of alcoh	nolic 🖂	11. Practice o	of
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms of gambling 14. Education 15. Water Resources												
<u> </u>	Agriculture	17. N.H. taxes:	Business Profits Ta		ness rprise Tax	Interest a Dividend:	_		: Specify any c ecial interest —		which you have a	
1 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-A:9 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.												
Date 0	01/11/2021				Signature of	Filer		G	C			

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