2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly) _ , 671
Full Name DONALS BANT	-Work Address 3 4	F Willand HUE, 1'	in Timonia NH
Primary Occupation 1705.0	e-mail *optional Bn 46-	Work Phone	603-591 7907
Name the office, position, board or commission, committee, board directors, etc. or employment with state or county government hby you. NO ACRONYMS	dof MITENNAE, Member peld Division & Ponts	n y the Persectively, + handens, Nevolving	next Asthonity's
A. List below the name, address, and type of any profession, busi proprietor, or employee, or served in any other professional or a calendar year. Sources of retirement benefits other than federal retire	ness, or other organization in which discory capacity, and from which	h you or a family member was an off any income in excess of \$10,000 wa	ficer, director, associate, partner, s derived during the preceding
1.			
2.			
If you have no qualifying income indicate by writing your initials ne	kt to the following statement.	My income does not qualify	J935
B. Indicate below whether you or a family member has a special into reportable special interest in an item on this list if a change in law, a discipline a licensee or permittee, or other decision by government affinancial effect on you or a family member than it would on the gen	change in administrative rule, a de- affecting the listed business, profes eral public:	cision whether or not to award a contr sion, occupation, group, or matter wo	act, grant a license or permit,
Any profession, occupation, or business licensed or cer profession, occupation, or category of business:	tified by the State of New Hampshi 	re. List each such	
	cluding brokers, 5. Bai ers, and landlords service		e of New Hampshire, county, or oal employment
7. N.H. Retirement 8. Current use land assessment program	9. Restaurants/ Colored	Sale and distribution of alcohol beverages	ic 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse	se or dog racing, or other legal form Ing	15. W	ater Resources
	Business Interest and Enterprise Tax Dividends Tax	18. Optional: Specify any oth special interest	er area in which you have a
have read RSA 15-A and hereby swear or affirm that the foregoing in person who knowingly falls to comply with the provisions of this cha			
Date 6/1/18-	j 1661/1	37-	RECEIVED
	Signat	ure of Reporting Individual	IIIN 1.2 2018

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

NEW HAMPSHIRE DEPARTMENT OF STATE