•	•		2021 NEW HAMP	SHIRE STATEM	IENT OF FINAN	CIAL IN	TERESTS - RSA 15	5-A		
Туре	or Print C	learty								
Full N	ame Sc	ott M. C	osta		Work	Address	13 New Boston Rd I	13 New Boston Rd Kingston NH 03848		
Primary Occupation President of Water Well Drilling Co.			Co. e-mail	il scosta@comacpumpandwell.com		ll.com	Work Phone 642-3683			
direct		or emp	n, board or commission, board bloyment with state or cou u. NO ACRONYMS						·····	
propri	ietor, or e	employe	e, address, and type of any pro e, or served in any other prof of retirement benefits other than	fessional or adviso	ory capacity, and f	rom whic	h any income in exc	ess of \$10,000 w	fficer, director, associate, partner, as derived during the preceding s necessary.)	
1.	Coma	c Pump	& Well LLC				,			
2.										
lf you	have no c	qualifyin	g income indicate by writing ye	our initials next to	the following state	ment.	My income	does not qualífy		
report discip	table spec line a lice	ial inter nsee or j		ange in law, a char government affec	nge in administrativ ting the listed busi	ve rule, a c	lecision whether or n	ot to award a con	os, or matters. A person has a tract, grant a license or permit, ould potentially have a greater	
			ision, occupation, or business l supation, or category of busine	and the second sec	d by the State of Ne II Drilling and Pump					
Γ.	2. Health	n Care	1 4 Insurance 11	Real Estate, incluc gent, developers, a	-	5. I	Banking or financial ices	11 1	ite of New Hampshire, county, or ipal employment	

١.			agent, develope	agent, developers, and landlords		1	' municipal employment	
Г	7. N.H. Retirement System		rent use land nent program	9. Restaurants/ lodging		10. Sale and distribution beverages	on of alcoholic	11. Practice of law
Г	12. Any business regulat Utilities Commission	ed by the Public	13. Hor of gambl	se or dog racing, or oth ing	er legal forms	14. Education	🕅 15. Water R	lesources
Γ.	16. Agriculture	17. N.H. taxes:			nterest and lividends Tax		ecify any other are interest —	a in which you have 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. **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.

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Date	<b></b>	littan li	RECEIVED
	January 6, 2021	Signature of Reporting Individual	JAN 1 9 2021
		Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301	NEW HAMPSHIRE DEPARTMENT OF STATE