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

Type or Print Clearly	
Full Name Robert E. Martch Work Address 121 Everett DAM	Rd. Dunbanton
Primary Occupation Retired e-mail 1: unabob @ a ol. Com Work Phone 60.	3-774-7270
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS WORK FORCE INOVATION BOARD	
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, or proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was dericalendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necess	ived during the preceding
1.	
2.	
f you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify	R.E.M.
discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would profession 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 5. Banking or financial services 6. State of N municipal err	lew Hampshire, county, or nployment
7. N.H. Retirement 8. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic beverages	11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms 14. Education 15. Water I	Resources
16. Agriculture 17. N.H. taxes: Business Business Enterprise Tax Dividends Tax 18. Optional: Specify any other are special interest—	ea 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. RS person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.	SA 15-A:9 Penalty. Any
person who knowingly tails to comply with the provisions of this chapter of knowingly files a faise statement shall be guilty of a misdefilearior.	RECEIVED
Date 03-31-2022 Signature of Filer Roft. E. 12 Cartel	APR 0 1 2022
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