

	Type or Print Clearly	_
	Full Name: Stephanie Ryan Work Address: 556 Pembroke St Pembroke NH a	13275
	Primary Occupation Chiopractor e-mail into Colors smads chiopractic com Work Phone 603724 4281	
	Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS Board of Chicopractic Exammers Board of Chicopractic Exammers	
~. ! x	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, partnership 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.)	ir, ig
	1. Crossroads Chiropractic, PC 3. RS Mowery Inc	
	2. CALOSSVOADS Chippractic Cakeside, PC 4. DBES PROPERTIES LLC 5.L.	ve Innatel
	If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify	LIC
į.	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, and landlords 5. Banking or financial services 6. State of New Hampshire, county, of municipal employment	r r
	7. N.H. Retirement 8. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic lodging 11. Practice of beverages	30
	Utilities Commission 13. Horse or dog racing, or other, legal forms of gambling rolls after the commission 14. Education 15. Water Resources 15. Wa	
	17. N.H. Business Business Interest and taxes: Business Business Interest and Dividends Tax Business Business Interest and Specify any other area in which you have a special interest —	_
ř.	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.	
	Date 1 24/2	IVED
	Signature of Reporting Individual JAN 2.	
•	Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301	