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2019 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS – RSA 15-A

Type or Print CLEARLY, Full Name Reto H. Boertschiger Work Address: DHMC, One Medical Carly Drive Coloren									
Primary Occupation Redistric Sugary E-mail Reta M. Bartschigerahitchart Work Phone 603 65 3 9883 NH 03256									
Full Name Reform Boertschiger Primary Occupation Pedicatric Surgery Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS. Work Address: DHMC, One Medical Cody Drive Coloran Work Phone 603 663 9883 NH 03286 E-mail Reform Review Commission Commission Committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS.									
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. **Market Contract C									
•	2								
	If you have no qualifying income indicate by writing your initials next to the following statement. My income does 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 any 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:								
风	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:								
M	2. Health Care 3. Insurance 4. Real Estate, including brokers, agent, developers, and landlords 5. Banking				or financial 6. State of New Hampshire, county, or municipal employment				
	7. N.H. Retirement System	8. Current u		9. Restaurant lodging	ts/	10. Sale and distribution beverages	of alcoholic	11. Practice of law	
	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							Sources	
	16. Agriculture			Business Enterprise Tax	Interest and Dividends Tax		ecify any other area in interest	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.									
Date 12/12/2018 WRX									
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								MAY 4 F 2040	

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

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NEW HAMPSHIRE DEPARTMENT OF STATE