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

government held by you.

Type or Print Clearly									
Full Name R	ichard C	chard C. Bailey, Jr.			33 Hazen Drive, Concord, NH 03305				
Primary Occup	ation	Assistant Commissioner	e-mail			Work Phone	603-223-3888		
		ion, board or commission, board of		issioner, Department of S	afety, Fire Standards	& Training Comm	nission,Statewide Interoperability		

NO ACRONYMS Executive Committee, Enhanced E911 Commission, ---See attached additional page---

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.	NH Public Utilities Commission		•
2.			
lf you ha	ve 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 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. I	nsurance			luding brokers, rs, and landlords	Γ.	5. Banki services	ing or financial	6. State of No municipal em	ew Hampshire, county, or ployment	
X	7. N.H. Retirement System				9. Restaurants/ 10. Sale and distrib lodging beverages			10. Sale and distribut beverages	ion of alcoholic	11. Practice of law	
	<ul> <li>12. Any business regulated by the Public</li> <li>Utilities Commission</li> <li>13. Horse or dog racing, or other of gambling</li> </ul>					her leg	al forms	14. Education	15. Water Resources		
	16. Agriculture	17. N.H. taxes:	– Busin Profit			Interes <sup>.</sup> Dividen			pecify any other are al 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. **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	01-15-2019	ANCI	RECEIVED
	04-03-2019	Signature of Reporting Individual	APR 0 4 2019
	Return to: Office of Secretary of State,	107 North Main Street, State House Room 204, Concord, NH 03301	NEW HAMPSHIRE DEPARTMENT OF STATE