2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	
Full Name Timothy Sint	Work Address 49 So. Main Steet Concold NH 03301
Primary Occupation CHAMBEL OF COMMITTEE e-ma	il Tsink@Koncoronhchamber.Com WorkPhone 603 224 2508
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	Workforce Innovation BOATA
proprietor, or employee, or served in any other professional or adv	s, or other organization in which you or a family member was an officer, director, associate, partner sory capacity, and from which any income in excess of \$10,000 was derived during the preceding and/or disability benefits shall be included. (Use additional sheets as necessary.)
1.	
2.	
If you have no qualifying income indicate by writing your initials next	o the following statement. My income does not qualify
reportable special interest in an item on this list if a change in law, a ch	st in any of the following businesses, professions, occupations, groups, or matters. A person has a ange in administrative rule, a decision whether or not to award a contract, grant a license or permit, ecting the listed business, profession, occupation, group, or matter would potentially have a greater al public:
Any profession, occupation, or business licensed or certific profession, occupation, or category of business:	ed by the State of New Hampshire. List each such
2. Health Care 3. Insurance 4. Real Estate, incl	
7. N.H. Retirement 8. Current use land assessment program	9. Restaurants/ 10. Sale and distribution of alcoholic 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse of gamblin	or dog racing, or other legal forms 14. Education 15. Water Resources
1 16 Agriculturo 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	siness Interest and Dividends Tax Interest and Special interest —
	ormation is true and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any ter or knowingly files a false statement shall be guilty of a misdemeanor.
Date 1/7/2021	JAN 1 1 2021 Signature of Reporting Individual

NEW HAMPSHIRE
DEPARTMENT OF STATE