

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

Type or Print Clearly

Full Name **DEBRA M. DOUGLAS** Work Address **14 Integra Dr Concord NH 03301**

Primary Occupation **Commissioner** e-mail **debradouglas1@gmail.com** Work Phone **603-271-7107**

Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. **Chairman, New Hampshire Lottery Commission**
 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.)

- Douglas, Leonard & Garvey PC, 14 South St Concord NH 03301**
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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 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:

| | | |
|--------------------------|---|--|
| <input type="checkbox"/> | 1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: | |
| <input type="checkbox"/> | 2. Health Care | <input type="checkbox"/> 3. Insurance |
| <input type="checkbox"/> | 4. Real Estate, including brokers, agent, developers, and landlords | <input checked="" type="checkbox"/> 5. Banking or financial services |
| <input type="checkbox"/> | 6. State of New Hampshire, county, or municipal employment | <input type="checkbox"/> 7. N.H. Retirement System |
| <input type="checkbox"/> | 8. Current use land assessment program | <input type="checkbox"/> 9. Restaurants/lodging |
| <input type="checkbox"/> | 10. Sale and distribution of alcoholic beverages | <input type="checkbox"/> 11. Practice of law |
| <input type="checkbox"/> | 11. Practice of law | <input type="checkbox"/> 12. Any business regulated by the Public Utilities Commission |
| <input type="checkbox"/> | 12. Any business regulated by the Public Utilities Commission | <input type="checkbox"/> 13. Horse or dog racing, or other legal forms of gambling |
| <input type="checkbox"/> | 13. Horse or dog racing, or other legal forms of gambling | <input type="checkbox"/> 14. Education |
| <input type="checkbox"/> | 14. Education | <input type="checkbox"/> 15. Water Resources |
| <input type="checkbox"/> | 15. Water Resources | <input type="checkbox"/> 16. Agriculture |
| <input type="checkbox"/> | 16. Agriculture | <input type="checkbox"/> 17. N.H. taxes: Business Profits Tax |
| <input type="checkbox"/> | 17. N.H. taxes: Business Profits Tax | <input type="checkbox"/> 18. Optional: Specify any other area in which you have a special interest --- |
| <input type="checkbox"/> | 18. Optional: Specify any other area in which you have a special interest --- | |

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 **1/7/22** Signature of Filer  **RECEIVED**
 JAN 21 2022
 NEW HAMPSHIRE DEPARTMENT OF