Type or Print Clearly	•		
Full Name BENJAMIN EDWARD WIL	という Work Address	239 SUIMOBILE.	RO, NORTH CONWAY 0386
Primary Occupation GENERAL MANAGER e-ma		mure, com Work Phone	
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you.  NO ACRONYMS	ID AND COMMUNITY VICE CHAIR	HERITAGE IN UES	TMENT PROGRAM
A. List below the name, address, and type of any profession, busine proprietor, or employee, or served in any other professional or advicalendar year. Sources of retirement benefits other than federal retirement	visory capacity, and from which an	y Income in excess of \$10,000 wa	is derived during the preceding
1. CM RESORT, LLC, 239 SKIMO	OBILE ROAD, NORT	H CONUMY, NH	0380
2. OOVER Saddlery, Inc., 525	GREAT ROAD, LITT	LETON MA 01460	Due
If you have no qualifying income Indicate by writing your initials next		My Income does not qualify	third
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:			
Any profession, occupation, or business licensed or certification profession, occupation, or category of business:	fied by the State of New Hampshire	List each such	γ = 1/15
2. Health Care 3. Insurance 4. Real Estate, Inc. agent, developer		<u> </u>	te of New Hampshire, county, or pal employment
7. N.H. Retirement 8. Current use land assessment program	9. Restaurants/	10. Sale and distribution of alcoholbeverages	olic 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			
	usiness Interest and Dividends Tax	18. Optional: Specify any ot special interest —	her area in which you have a
I have read RSA 15-A and hereby swear or affirm that the foregoing in person who knowingly fails to comply with the provisions of this chap			
	· · · · · · · · · · · · · · · · · · ·		RECEIVED
Date     - 15 - 2021	Signature of Filer.		JAN 1 9 2021
		/	

https://sos.nh.gov/administration/ethics/financial-interests-rsa-15-a-and-12-g/

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

NEW HAMPSHIRE DEPARTMENT OF STATE