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

Type	or Print Clearly	<u>/</u>								•
Full N	lame DAWN BUKER					Work Address 29 HAZEN DR, CONCORD 03301				
Prima	ry Occupation	DES EI	MPLOYEE		e-mail	DAWN.	BUKER@	DES.NH.GOV	Work Phone	603-271-1449
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS					SEPTIC SYSTEM EVALUATOR BOARD					
propri	etor, or emplo	yee, or sen	ved in any c	ther profession	al or advisory	capacity, and	from which	ich you or a family ments in the control of the con	ess of \$10,000 w	officer, director, associate, partner vas derived during the preceding is necessary.)
1.										
2.					·					
If you	have no qualify	ing income	indicate by	writing your init	tials next to th	e following stat	tement.	My income	does not qualify	DB are
report discipl	able special inti line a licensee o ial effect on you	erest in an or permitted u or a family fession, occ	item on this let, or other de y member th cupation, or l	ist if a change in cision by gover an it would on to ousiness license	n law, a chang nment affectir the general pu	e in administrating the listed build	tive rule, a d siness, profe	lecision whether or no	ot to award a con	os, or matters. A person has a tract, grant a license or permit, rould potentially have a greater
<u> </u>	2. Health Care	<u></u>	surance	11 1	state, includin evelopers, and	-	5. B	Banking or financial ices	11 1	nte of New Hampshire, county, or cipal employment
	7. N.H. Retire System	ment	1 i	rrent use land ment program	1 I	9. Restaurants/ odging	<u>'</u>	10. Sale and dist beverages	ribution of alcoh	olic 11. Practice of law
	12. Any busines tilities Commi		by the Publi	F	13. Horse or d f gambling	og racing, or ot	her legal fo	rms 14. Educat	ion 🗀 15.	Water Resources
	16. Agriculture		17. N.H. taxes:	Business Profits Tax	Busine Enterp		Interest and Dividends T		al: Specify any opecial interest—	ther area in which you have a
								to the best of my kno etement shall be guilt		ef. RSA 15-A:9 Penalty. Any nor.
Date	1/12/2021						Dan	- Julia-		RECEIVED
Date							Sign	nature of Reporting In	dividual	JAN 1 9 2021
		Retu	ırn to: Office	of Secretary of S	State, 107 Nort	th Main Street, !	State House	Room 204, Concord,	NH 03301	NEW HAMPSHIRE DEPARTMENT OF STATE