## 2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS – RSA 15-A

Type or Print CLEARLY Full Name Heather McMaho	Work Address: 19	4A Pleasan	t 5+ # a	205 Concord nt
Full Name Heather McMaho  Primary Occupation Mental Heath Courselar E-mail  Name the office, position, board or commission, committee, board of Public Medicators, etc. or complement with the course of the committee of the commi	heatherman	ahon oc @	Work Phone <u>60</u>	<u>3-491-2714</u>
Name the office, position, board or commission, committee, board of <u>Vulolic We</u> directors, etc. or employment with state or county government held by you. NO ACRONYMS.	imber Newd	Hampshire	board of	Licensed Dieticians
A. List below the name, address, and type of any profession, business, or other org proprietor, or employee, or served in any other professional or advisory capacity calendar year. Sources of retirement benefits other than federal retirement and/	y, and from which any in or disability benefits sha	ncome in excess of \$10 all be included. (Use ac	,000 was derived d	uring the preceding
1. Optimistic Counseling PLLC- Sole	2 proprieto	·C		
2.				· ·
If you have no qualifying income indicate by writing your initials next to the following s	statement.	My income	e does not qualify _	
reportable special interest in any item on this list if a change in law, a change in discipline a licensee or permittee, or other decision by government affecting the 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 Ne occupation, or category of business:	e listed business, professi	ion, occupation, group		
2. Health Care  3. Insurance  4. Real Estate, including brokers, agent, developers, and landlords	5. Banking services	or financial	6. State of New municipal empl	Hampshire, county, or coyment
7. N.H. Retirement System  8. Current use land assessment program  9. Restaut	11	O. Sale and distribution everages	of alcoholic	11. Practice of law
12. Any business regulated by the Public Utilities Commission  13. Horse or dog racing, or gambling	r other legal forms of	14. Education	15. Water Re	sources
16. Agriculture 17. N.H. Business Enterprise Tax	Interest and Dividends Tax	18. Optional: Special i	cify any other area in nterest	which you have a
I have read RSA 15-A and hereby swear or affirm that the foregoing information <b>Penalty</b> . Any person who knowingly fails to comply with the provisions of this Date $(0-1)^2 - 20$				
	Signatu	re of Reporting Indivi	dual	RECEIVED

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

JUN 2 3 2020