2017 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly		
Full Name Michael Anthony Zenk Work Address NHSP-M, 281 N. State St., Concord, NH03301		
Primary Occupation Warden e-mail *optional michael. Zenkadoc. nh. gov Work Phone 603-271-1811		
The office, position, appointment, or employment with state government held by you. NO ACRONYMS Warden of the New Hampshire Department of Corrections		
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.)		
1. Ohio Public Employees Refirement System, 277 Fast Town Street, Columbus, OH43215		
2 Toledo Municipal Court, 555 N. Erie St., Toledo, OH 43604 (former employer)		
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: 1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such		
profession, occupation, or category of business:		
2. Health Care 3. Insurance 4. Real Estate, including brokers, agent, developers, and landlords age		
7. N.H. RetirementSystem 8. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic beverages 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		
16. Agriculture 17. N.H. Business Business Interest and Dividends Tax Dividends Tax 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. RECEIVE		
Date <u>January 12,201</u> 7 Mrcl and Mathory Lebe Signature of Reporting Individual AN 2320		

NEW HAMPSHIF -

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Full Name Michael Anthony Zenk Work Address NHS	P-M, 281 N. State St., Concord NHO	
Primary Occupation Warden e-mail *optional michael. Zo	Eak adoc nhage Work Phone 603-271-1811	
The office, position, appointment, or warden of the New Hangshire State Prison for Men employment with state government held by you. NO ACRONYMS New Hangshire Department of Corrections		
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.)		
1. Thrift Savings Plan, P. O. Box 385021, Bir	minghan, AL35238	
2.		
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 busine reportable special interest in an item on this list if a change in law, a change in administrative rule, a de discipline a licensee or permittee, or other decision by government affecting the listed business, profes 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 New Hampsh profession, occupation, or category of business:	cision whether or not to award a contract, grant a license or permit, ssion, occupation, group, or matter would potentially have a greater	
	anking or financial 6. State of New Hampshire, county, or municipal employment	
7. N.H. RetirementSystem 8. Current use land assessment program 9. Restaurants/ lodging	10. Sale and distribution of alcoholic	
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal form of gambling	ms 14. Education 15. Water Resources	
Total Tax Business Business Business Interest and Dividends Tax Dividend		
I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to person who knowingly fails to comply with the provisions of this chapter or knowingly files a false state.	ement shall be guilty of a misdemeanor.	
Date January 12, 2017 Mohaul	anthony Leke RECEIVED	
Signa	nture of Reporting Individual JAN 23 2017	