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

Type or I	Prin <u>t Clearl</u> y	y										-	
Full Nam	e Dean C	hriston			-	Wor	k Address	32 Constitu	ition Drive, Bed	Iford, NH			
Primary (Occupation	Executive	e Director, NH	IHFA	e-mail	dchriston@nhh	fa.org		Worl	(Phone	603-472-8	623	
directors		mploymer		ion, board of or county NYMS	Council on R	or, NH Housing F Resources & Dev; eragency Council	Member, C	ouncil of Part	ner Agencies; l	Member, Co	ommunity De	ev Advisory Co	ouncil;
proprieto	r, or emplo	yee, or sei	ved in any o	ther professi	sion, business, onal or adviso	or other organizery capacity, and and/or disability	from which	n any income	e in excess of	\$10,000 w	as derived d	r, associate, p uring the pre	artner, ceding
1.	New Hamp	shire Hous	ing Finance A	authority, 32 (Constitution Dr	ive, Bedford, NH	03110						-
2.						-		*	-	-			
If you hav	e no qualify	ing incom	e indicate by	writing your i	initials next to t	the following sta	tement.	Му	income does i	not qualify			
reportabl discipline	e special int a licensee c	erest in an or permitte	item on this l e, or other de	ist if a change cision by gov	e in law, a chan	in any of the folloge in administrating the listed buoublic:	tive rule, a d	ecision whet	her or not to a	ward a con	tract, grant a	license or peri	mit,
T ₁			cupation, or l , or category		sed or certified	by the State of	New Hamps	hire. List eac	h such				
<u> </u>	Health Care	 	surance	II .	ıl Estate, includ t, developers, a	•	⊠ 5. E serv	Banking or fin	nancial		te of New Ha ipal employr	ampshire, cour nent	nty, or
IX	N.H. Retire stem	ment	11	rrent use land ment program	11 1	9. Restaurants, lodging	/ Г:	10. Sale beverage	and distributions	on of alcoh	olic	11. Practic	e of
	Any busines ies Commi		by the Publi	ic	13. Horse or of gambling	dog racing, or o	ther legal fo	rms F, 14	4. Education	T 15.	Water Resou	rces	
 16	. Agriculture	9	17. N.H. taxes:	Business Profits Ta			Interest and Dividends T		8. Optional: Sp specia	ecify any o interest	ther area in v	vhich you have	e a
I have rea person w	d RSA 15-A ho knowing	and hereby	y swear or aff omply with tl	irm that the for	oregoing infor of this chapte	mation is true an r or knowingly fil	d complete les a false sta	to the best o	f my knowledg I be guilty of a	e and belie misdemea	ef. RSA 15- nor. RE(A:9 Penalty. A	\ny
Date	January 2, 2	.020	<u> </u>	 .		- ·	Val	1 /	M		J <u>A</u> l	N 2 1 2020	<u>.</u>
•						<i>y y</i>	Sign	nature oz kep	orting Individu	aı	NEW	HAMPSHIRE	<u> </u>

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

NEW HAMPSHIRE DEPARTMENT OF STATE