# 2014 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

**Type or Print Clearly**

Full Name: Douglas M. Aiken

Work Address: 9 Bentley Road, Moultonborough, NH 03254

Primary Occupation: Deputy Executive Director

e-mail*optional:

Work Phone: 603.253.3040

The office, position, appointment, or employment with state government held by you. NO ACRONYMS: Commissioner, NH Enhanced 9-1-1 Commission

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. IMSA, P.O. Box 539, Newark, NY 14513, Non-profit Association; IMSA Educational Foundation, P.O. Box 146, Center Harbor, NH 03226, Non-Profit Foundation;

2. Douglas Communications Corporation, 9 Bentley Road, Moultonborough, NH 03254, Consulting; NH Retirement System, Concord, NH

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: NH Master Electrician; NH Registered Emergency Medical Technician

☐ 2. Health Care ☐ 3. Insurance ☐ 4. Real Estate, including brokers, agent, developers, and landlords ☐ 5. Banking or financial services ☐ 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 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. taxes: ☒ Business Profits Tax ☐ Business Enterprise Tax ☐ Interest and Dividends Tax ☐ *18. Optional*: Specify any other area in which you have a 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.

Date: 18 January 2014

Signature of Reporting Individual

RECEIVED
JAN 21 2014
NEW HAMPSHIRE
DEPARTMENT OF STATE

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