

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

Type or Print Clearly

Full Name

John Frank Scruton

Work Address

PO Box 660, 333 Colet Hwy, Barrington, NH

Primary Occupation

Town Administrator

e-mail \*optional BarringtonTA@gmail.com

Work Phone

603 664-7395

The office, position, appointment, or employment with state government held by you. NO ACRONYMS

Trustee PRIMEX

Board NH Municipal Association

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)

- NH Retirement System (Self + wife Sandra Scruton) Social Security wife
- Town of Barrington, Rental Income Family Trust (John + Sandra Scruton + Revocable Trust)

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:

<input checked="" type="checkbox"/>	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: <u>NH Real Estate license</u>
<input type="checkbox"/>	2. Health Care
<input checked="" type="checkbox"/>	3. Insurance
<input type="checkbox"/>	4. Real Estate, including brokers, agent, developers, and landlords
<input checked="" type="checkbox"/>	7. N.H. Retirement System
<input checked="" type="checkbox"/>	8. Current use land assessment program
<input type="checkbox"/>	9. Restaurants/ lodging
<input type="checkbox"/>	10. Sale and distribution of alcoholic beverages
<input type="checkbox"/>	11. Practice of law
<input type="checkbox"/>	12. Any business regulated by the Public Utilities Commission
<input type="checkbox"/>	13. Horse or dog racing, or other legal forms of gambling
<input type="checkbox"/>	14. Education
<input type="checkbox"/>	15. Water Resources
<input type="checkbox"/>	16. Agriculture
<input type="checkbox"/>	17. N.H. Business Profits Tax
<input type="checkbox"/>	18. Optional: Specify any other area in which you have a special interest: <u>RSA 5B-RISK Pool</u>

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

June 3, 2014

Signature of Reporting Individual

John Scruton

JUL 15 2014

RECEIVED

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

NEW HAMPSHIRE DEPARTMENT OF STATE