2016 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name: Susan G. Vanderheide, PhD, APRN

Work Address: Harbor Care Health & Wellness Center 45 High Street, Nashua NH 03060

Primary Occupation: Psychologist & Psychiatric Nurse Practitioner

e-mail *optional: SUEV2003@hotmail.com

Work Phone: (603) 891-1152

The office, position, appointment, or employment with state government held by you. NO ACRONYMS: Board Member of Psychology Board

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. Harbor Care Health & Wellness Center, 45 High St. Nashua NH 03060
2. Susan G. Vanderheide, PhD, APRN – Private Practice – 3-B Taggart Drive Nashua NH 03060

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:

- [x] 1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: Psychology License, Nursing License
- [x] 2. Health Care
- [ ] 3. Insurance
- [x] 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: [x] Business Profits Tax [x] Business Enterprise Tax [x] 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 12-31-2015

PhD, APRN

Signature of Reporting Individual

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