

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

Type or Print Clearly

Full Name CAMERON ELBRED Work Address 8149 SANTA MONICA BLVD. #439 N. Hollywood CA 90046
 Primary Occupation FILM PRODUCER e-mail Camelbred@gmail.com Work Phone 617-510-7061

Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. N/A
 NO ACRONYMS

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. DI BONAVENTURA PICTURES, 5% PARAMOUNT PICTURES, 555 S. MELROSE AVE., LOS ANGELES, CA 90038
 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 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 with profession, occupation, or category of business: _____
- 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. NJL Retirement System 8. Current use land assessment program 9. Auctioneers/ Auctioneering 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. NJL Larceny 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 1-10-19 _____
 Signature of Reporting Individual

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

