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

Type or	Print Clearly	<u>/</u>				_				
Full Nar	ne Mauree	Maureen Sullivan			Work Address 100		100 Campus Dr	00 Campus Drive, Suite 11, Portsmouth, NH 03801		
rimary	Occupation	Executive	Director		e-mail MSulliva	n@cacnh.org		Work Phone	603-422-8240	
Name the office, position, board or commission, board or directors, etc. or employment with state or count government held by you. NO ACRONYMS					·					
ropriet	or, or emplo	yee, or serv	ed in any	other professi		ty, and from whi	ch any income in e	excess of \$10,000 v	officer, director, associate, partner was derived during the preceding as necessary.)	
you ha	ve no qualify	ving income	indicate by	writing your i	nitials next to the follow	ving statement.	My inco	me does not qualify	MS	
portal isciplin	ole special int ne a licensee d	erest in an i or permittee	tem on this , or other d	list if a change ecision by gov	e in law, a change in adr	ninistrative rule, a	decision whether o	r not to award a co	ps, or matters. A person has a ntract, grant a license or permit, would potentially have a greater	
j				business licen of business:	sed or certified by the S	tate of New Hamp	oshire. List each suc	h		
2	. Health Care	3. Ins	surance	()	l Estate, including broke , developers, and landlo		Banking or financia		ate of New Hampshire, county, or cipal employment	
	7. N.H. Retire ystem	ment	1 :	urrent use land sment prograr		aurants/		distribution of alco	holic 11. Practice of law	
	. Any busines lities Commi		by the Pub	lic	13. Horse or dog racion of gambling	ng, or other legal f	forms 14. Edu	ucation 5	. Water Resources	
] 1	6. Agriculture	<u> </u>	17. N.H. taxes:	Business Profits Ta		Interest a Dividends		tional: Specify any special interest -	other area in which you have a 	
have re	ead RSA 15-A who knowing	and hereby lly fails to co	swear or af	firm that the fo	oregoing information is of this chapter or know	true and complet ringly files a false s	e to the best of my litatement shall be g	knowledge and bel uilty of a misdeme	ief. RSA 15-A:9 Penalty. Any anor. RECEIVE	
Date	12/6/19					Maure	ex Dec	Mariana	DEC 0 9 2019	

NEW HAMPSHIRE DEPARTMENT OF STATE