2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type	or Print Clearly					
Full N	ame Jameson	Randon M	Work Address	53 Regiono	1 Dr. Suite 200 1	Concord, NHU3301
Prima	ry Occupation Firmer	ial Examiner	e-mail joureson.c. van dall @b	inking. nh.gov	Work Phone (603)	271-3561
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. 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.	Jameson Ran	dall (self); NH Ban	king Dept, S3 Regional Dr. S.	ite 200, (mo	and, NH 03301; rega	latery agency
2.	Argue Laws	(combitant); Lowes	; 1407 Lake Share Rd. Gilfor	1, NH 03249	have imprimement	
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 						
l	profession, occupatio	on, or category of business:	L		C. State of Nou	llamachira county or
	2. Health Care 3. I		Il Estate, including brokers, 5.1 t, developers, and landlords serv			
7	7. N.H. Retirement System	8. Current use land assessment program	1 1 1	10. Sale and d beverages	istribution of alcoholic	11. Practice of law
12. Any business regulated by the Public 13. Horse or dog racing, or other legal forms 14. Education 15. Water Resources Utilities Commission of gambling 14. Education 15. Water Resources						
	16. Agriculture	17. N.H. Business taxes: Profits Ta			onal: Specify any other area i special interest —	in which you have a
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	9/12/22		Signature of Filer	J C		SEP 1 3 2022
	Rei	turn to: Office of Secretary c	of State, 107 North Main Street, State Hous	e Room 204, Conco	ra, NH 03301	DEPARTMENT OF STATE