2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly				
Full Name Thomas J. Moses	Work Addre	463 Washington	st. Keene,	NH 03431
Primary Occupation	e-mail tmoses 43@me	wy.com w	ork Phone (6	03)352-3022
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	Chairman, OCA Res	idential Ratepay	ers Advisor	yBoard
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.				
2.				······································
If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify TAM TAM				
8. 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.				
Any profession, occupation, or business licensed profession, occupation, or category of business:	or certified by the State of New Ha	mpshire. List each such		
agent, de	tate, including brokers, evelopers, and landlords	5. Banking or financial services	6. State of M municipal er	lew Hampshire, county, or not provide the second se
7. N.H. Retirement 8. Current use land System assessment program	9. Restaurants/ lodging	10. Sale and distribut	·	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 Tax	Business Interest Enterprise Tax Dividen	tand 18. Optional: S ds Tax speci	pecify any other and interest	ea 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 misdemean group of the statement of the statement shall be guilty of a misdemean group of the statement shall be guilty of the st				
Date January 7, 2021	_ (ilan	as Alreas		RECEIVED
1 -		Signature of Reporting Individ	lual	JAN -7 2021

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

NEW HAMPSHIRE DEPARTMENT OF STATE ۰.