

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

Type or Pri	nt Clearly									
Full Name	Nicole Marie Plan	ie .		Work Addres	s 42 Pe	rimeter Rd Concor	HNE			
Primary Oc	cupation Warden	· · · · · · · · · · · · · · · · · · ·	e-mail	nicole plante@doc.nh.go	<b>w</b>		rk Phone	603-271-0	205	
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			NH Correctional Facility for Women, Warden							
proprietor,	or employee, or se	ess, and type of any profession reverved in any other profession rement benefits other than feder	nat or adviso	ory capacity, and from w	hich any i	ncome in excess o	f \$10,000 w	vas derived d	luring the preceding	
1.	<del></del>	· · · · · · · · · · · · · · · · · · ·		* *						
2.		Val.		····		•				
If you have i	no qualifying Incom	ne indicate by writing your in	itials next to	the following statement.		My income doe	s not qualify	NI NI	,	
reportable s discipline a financial effo 1.	special interest in ar licensee or permitte ect on you or a fami Any profession, or	or a family member has a sp item on this list if a change se, or other decision by gove lly member than it would on coupation, or business licens n, or category of business:	In law, a char mment affec the general	nge In administrative rule, ting the listed business, p public:	a decision rofession,	whether or not to occupation, group	award a cor	itract, grant a	license or permit,	
∫ 2, He	alth Care	nsurance II	Estate, Includ developers, a	• 11	5. Banking ervices	or financial		ate of New Ha	impshire, county, or nent	
r 7. N.I Syste	H. Retirement	6. Current use land assessment program		9. Restaurants/ lodging		. Sale and distribu verages	tion of alcoh	rollc J	11. Practice of law	
	y business regulate Commission		13. Horse or of gambling	dog racing, or other lega	l forms	; 14. Education	T; 15.	Water Resou	rces	
[. 16. A	griculture	17, N.H. Business Profits Tax	Busin Enter	ness Interest rprise Tax Dividen		18. Optional: 5 speci	pecify any o al interest		which you have a	
l have read f person who	RSA 15-A and hereb knowingly falls to c	y swear or affirm that the fo comply with the provisions	regoing infor of this chapte	mation is true and comple r or knowingly files a false	rte to the l statemen	pest of my knowled t shall be guilty of	lge and bell a misdemea	ef. RSA 15- nor.	A:9 Penalty. Any	
Out 1.1	1-21	Nicole Plante								
, J''				Signature of Reporting Individual						

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