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

Type or Print Clearly	
Full Name Tonya Fribery Warren Work Address 101 Boulder Birt Drive Plymo	our NH 3264
	-536-4000
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS Board of Psychologists	
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, disproprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was derive calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessions)	ed during the preceding
1. Mid State Health Center 101 Boulder Point Drive Phymouth NH 03264 Federally Qualified	Houlh Center
2.	
If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify	
discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would pote 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 profession, occupation, or category of business: 2. He W. G. G. Banking or financial G. State of New Hampshire G. St	v Hampshire, county, or
2. Health Care 3. Insurance agent, developers, and landlords services municipal emp	loyment
7. N.H. Retirement 8. Current use land 9. Restaurants/ 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 Re-	sources
16. Agriculture 17. N.H. Business Business Interest and taxes: Profits Tax Enterprise Tax Dividends Tax 18. Optional: Specify any other area special interest	
	in which you have a
research the fill of the grant of the production of the grant of the g	in which you have a 15-A:9 Penalty. Any
Date 7-28-2(Signature of Filer	15-A:9 Penalty. Any