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

Type or Prin	t Clearly								
Full Name	Daniel Swe	eet			Work Address	25 Frontage Road,	Andover, MA 018	10	
Primary Occ	upation	lanager		e-mail	d-tsweet@comcast.net	· · · · · · · · · · · · · · · · · · ·	Work Phone	978-749-7730	
					nire Waste Management Co	uncil	-		l
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.			
2.			
lf you ha	ve no qualifying income indicate by writing your initials next to the following statement.	My income does not qualify	DS

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:

 Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: 											
2. Health Care	3. In	nsurance		l. Real Estate, inc agent, develope	luding brokers, rs, and landlords		5. Banki services	ing or	financial	6. State of Ne municipal em	ew Hampshire, county, or ployment
- 7. N.H. Retirement 8. Current use System assessment pro							-	0. Sale and distribution of alcoholic 11. Practic		11. Practice of law	
12. Any business i Utilities Commiss	-	d by the Publi	13. Horse or dog racing, or other legal forms of gambling				14. Education	15. Water R	esources		
16. Agriculture		17. N.H. taxes:			Business Interprise Tax	Interes Divider			18. Optional: S specia	pecify any other are al interest	a in which you have a

		ereby swear or affirm that the foregoing information is true an	1 7 5	
person	who knowingly fail	s to comply with the provisions of this chapter or knowingly fil	es a false statement shall be guilty of a misdemear	" RECEIVED
				L UECEIAED
			N Jeltesit	
Date	12/29/2020		Call i Start	JAN 1 9 2021
	· · · · · · ·		Signature of Reporting Individual	
				NEW HAMPSHIRE DEPARTMENT OF STATE
	DEPARTMENT OF STATE			

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