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

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SEP 0 7 2021

Type or Pri	nt Clearly				SEP 07 2021
Full Name	MARK A. SANBORN	Work Address	29 HAZEN DRIVE, CONCO	ORD, NH 03301	NEW HAMPSHIRE DEPARTMENT OF STA
Primary Oc	cupation Asst. Commissioner, NHDES	e-mail Mark.A.Sanborn1@des.nh.g	jov Wo	rk Phone 603-	271-8806
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you.  NO ACRONYMS		Assistant Commissioner, NH Department	of Environmental Services		
proprietor,	ow the name, address, and type of any profession or employee, or served in any other profession ar. Sources of retirement benefits other than feder	nal or advisory capacity, and from whic	h any income in excess of	f \$10,000 was deri	ved during the preceding
1. N/	/A				
2.					
If you have no qualifying income indicate by writing your initials next to the following statement.  My income does not qualify					MS
reportable s discipline a	below whether you or a family member has a spo special interest in an item on this list if a change licensee or permittee, or other decision by gove tect on you or a family member than it would on	in law, a change in administrative rule, a c rnment affecting the listed business, prof	decision whether or not to a	award a contract, g	rant a license or permit,
	Any profession, occupation, or business license of ession, occupation, or category of business:	ed or certified by the State of New Hamps	hire. List each such		
☐ 2. He		Estate, including brokers, 5. I developers, and landlords serv	Banking or financial ices	6. State of No	ew Hampshire, county, or aployment
⊠ 7. N. Syste	H. Retirement 8. Current use land assessment program	9. Restaurants/ lodging	<ol><li>Sale and distribut beverages</li></ol>	ion of alcoholic	11. Practice of law
		13. Horse or dog racing, or other legal foof gambling	14. Education	15. Water F	Resources
┌ 16. A	griculture 17. N.H. Business taxes: Profits Tax	Business Interest and Dividends T		pecify any other are Il interest	ea in which you have a
	RSA 15-A and hereby swear or affirm that the for knowingly fails to comply with the provisions				A 15-A:9 Penalty. Any
Date Se	ptember 2, 2021		nature of Reporting Individ	ual	