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

Type o	or Print C	learly											
Full Na	ame (	Coll	een	Pouli	ot			Work Addr	ess IC	o McGregor	St. Man	chaster, NH 03100	≻
Primai	ry Occupa	ation	RN			e-n	nail Colleer	n. pouli	stec	mc-nh-org W	ork Phone	03-663-7839	
directo		or em	ploymer	d or commis nt with stat NO ACRO	te or cou					9			-
propri	etor, or e	employe	ee, or sei	rved in any	other prof	essional or ad	dvisory capacity	, and from	which ar		of \$10,000 was d	r, director, associate, partner, lerived during the preceding cessary.)	
1.	Ret	ired	Lieu	tenent	Goffs	stown Po	lice Dept	326 M	vast Re	1. Gotfstawn,	NH 03045	Rension NH Retire	min
2.	Reg	istere	ed NU	rse Ca	Shalic	Medic	al Center	- 100	MC 6	regor st. N	ranchester	NH OBIOD S	y <del>s</del> te
lf you	have no o	qualifyir	ng incom	e indicate by	/ writing yo	our initials nex	t to the followin	ng statemen	t.	My income do	es not qualify		
report discipl	able spec line a lice ial effect 1. Ai	cial inte nsee or on you ny profe	rest in an permitte or a fami	item on this ee, or other d ly member t	i list if a cha lecision by han it woul business li	ange in law, a o government a Id on the gen icensed or cer	change in admin affecting the list eral public:	nistrative rul ted business,	e, a decis profession ampshire	ion whether or not to on, occupation, grou List each such	o award a contrac	r matters. A person has a t, grant a license or permit, d potentially have a greater	-
R	2. Healtl	h Care	<b>[</b> ] 3. li	nsurance			ncluding brokers ers, and landlord		5. Banł services	king or financial		f New Hampshire, county, or employment	
₹	7. N.H. System		nent		urrent use sment pro		9. Restau lodging	urants/		10. Sale and distrib beverages	ution of alcoholic	11. Practice of law	-
	12. Any b Itilities C			d by the Pub	olic	of gambl	se or dog racing ling	g, or other le	gal forms	14. Education	15. Wat	er Resources	-
Г	16. Agri	culture		17. N.H. taxes:			Business Enterprise Tax		st and nds Tax	18. Optional: spe	Specify any other cial interest —	area in which you have a	-
										he best of my knowle nent shall be guilty o		RSA 15-A:9 Penalty. Any	-
Date	10	5/15	1 202	-1			Signature	e of Filer	C	eleer fa	lest	RECEIVED	>
			Ret	turn to: Offic	e of Secreta	ary of State, 10	07 North Main S	treet, State I	louse Ro	om 204, Concord, NH	103301	OCT <b>19</b> 2021	
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