2021 NEW HAMPSHIRE	E STATEMENT OF FINANCIAL INT	ERESTS - RSA 15-A	
Type or Print Clearly			
Full Name GARY FRANCOEUA	Work Address	23 woodcrest Dr	HUBSON NH 0305
Primary Occupation Property MAMASEMEN	t e-mail	Work Phone	603 883 9060
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	MANUFACTURED Hous.	ng instalation St.	madrade Board
A. List below the name, address, and type of any profession proprietor, or employee, or served in any other profession calendar year. Sources of retirement benefits other than federa	al or advisory capacity, and from which	any income in excess of \$10,000 w	as derived during the preceding
1. Hawthere Woods LLC	PO BOX 992	Hudson NH	
2. FRANCOELR FAM: 14 TRU:	st PO Box 992	Hudson NH	
f you have no qualifying income indicate by writing your initi		My income does not qualify	
B. Indicate below whether you or a family member has a spec reportable special interest in an item on this list if a change in discipline a licensee or permittee, or other decision by govern financial effect on you or a family member than it would on t	law, a change in administrative rule, a de ment affecting the listed business, profes	cision whether or not to award a cont	ract, grant a license or permit,
1. Any profession, occupation, or business licensed profession, occupation, or category of business:	or certified by the State of New Hampshi	re. List each such	
	tate, including brokers, 5. Ba evelopers, and landlords service		e of New Hampshire, county, or pal employment
7. N.H. Retirement 8. Current use land System assessment program	9. Restaurants/	10. Sale and distribution of alcoho beverages	olic 11. Practice of law
12 Any business regulated by the Public 1	3. Horse or dog racing, or other legal forn		

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Γ.	12. Any business regulated Utilities Commission	by the Public	13. Hors of gambl	se or dog racing, or o ing	other legal forms	14. Education	15. Water Resources
<b>[</b> ]	16. Agriculture			Business Enterprise Tax	Interest and Dividends Tax	· · · · · · · · · · · · · · · · · · ·	cify any other area in which you have a nterest

I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.

				RECEIVED
Date	10/8/21	Signature of Filer	this b	OCT 1 2 2021
				NEW HAMPSHIRE
	Determine Office of Comptons of Charter 1	OT Nouth Main Church State	Verse Boom 204 Concord NH 02201	DEPARTMENT OF STATE

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