2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or P	rint Clearly			<u>_</u>			
Full Name	James C. Va	ra		Work Address	50 Storrs Street,	Concord, NI	1 03301
Primary O	occupation Directo	or of Admin. & COO	e-mail james.	vara@nh.liquo	r.gov	Work Phone	603-230-7073
directors,		rd or commission, board of nt with state or county NO ACRONYMS	New Hampshire	Liquor Commis	ssion, Director of A	\dministratior	n, Chief Operating Officer
proprietor	r, or employee, or se		nal or advisory capaci	ty, and from whic	h any income in exce	ss of \$10,000 wa	ficer, director, associate, partner is derived during the preceding necessary.)
1.	Kathleen H. Ken	nedy, Dir. of Communi	ty Relations/Deve	lopment, New	London Hospital (Spouse), 273	County Road,New Lond
2.							
If you have	e no qualifying incom	ne indicate by writing your in	itials next to the follow	ing statement.	My income o	loes not qualify	
reportabl discipline financial	e special interest in a e a licensee or permit effect on you or a fan 1. Any profession, c	in item on this list if a change	e in law, a change in addernment affecting the land the general public:	ministrative rule, a isted business, pro	decision whether or no fession, occupation, gr shire. List each such	ot to award a con	s, or matters. A person has a tract, grant a license or permit, ould potentially have a greater
			New Hampshire Estate, including broke		on Banking or financial	6. Stat	e of New Hampshire, county, or
7.1	N.H. Retirement tem	8. Current use land assessment program	developers, and landlo 9. Resta lodging		tees 10. Sale and distr beverages	·	oal employment lic 11. Practice of law
	any business regulate	, , ,	13. Horse or dog racin of gambling	g, or other legal fo	rms 14. Education	on 15. V	Vater Resources
16.	Agriculture	17. N.H. Business taxes: Profits Tax	Business Enterprise Tax	Interest and Dividends T	11 1	al: Specify any other	her area in which you have a
I have read person wh	d RSA 15-A and herek to knowingly fails to o	by swear or affirm that the for comply with the provisions	egoing information is t of this chapter or knowi	rue and complete ngly files a false sta	to the best of my know atement shall be guilty	rledge and belief of a misdemean	or
Date 1	0/27/2022		Signatur	e of Filer	70.		OCT 2 8 2022
	Ref	turn to: Office of Secretary of	State, 107 North Main	Street, State House	Room 204, Concord, N	IH 03301	NEW HAMPSHIRE DEPARTMENT OF STATE