

Full name Berry Lubiac Work Address 140 Lincoln St. Worcester, MA 01653
 Primary Occupation Insurance e-mail rlubiac@hartford.com Work Phone (603) 211 1891

Name the office, position, board or commission, board of directors, etc. or employers with state or county government tied by you. Commissioner of NH fire standards
 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 how much 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).
NO ACTIVITIES

1. _____
 2. _____

If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify is

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 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 other financial effect on you or a family member than it would on the general public.

1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each with profession, occupation, or category of business.
 2. Health Care
 3. Insurance
 4. Real Estate, including brokers, agent, developers, and landlords.
 5. Banking or financial services
 6. State of New Hampshire, county, or municipal employment
 7. NH Retirement System
 8. Current use land assessment program
 9. Restaurants/cafes
 10. Sale and distribution of alcoholic beverages
 11. Practice of law
 12. Any business regulated by the Public Utilities Commission
 13. Horse or dog racing, or other legal forms of gambling
 14. Education
 15. Water Resources
 16. Agriculture
 17. NH Business Profits Tax
 18. Other: Specify any other area in which you have a special interest: _____
 19. Interest and Dividend Tax
 20. Other: Specify any other area in which you have a special interest: _____

I have read RSA 15-A and hereby attest 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.

Date: 1/7/2021 Berry Lubiac
 Signature of Respondent

RECEIVED
 JAN - 7 2021
 NEW HAMPSHIRE
 DEPARTMENT OF STATE