

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

Type or P	rint Clearly						
Full Name	Michael W. Sitar, Jr.		Work Addre	ss 1:	2 Center Street, T	ilton, NH	03276
Primary C	Occupation Fire Chief	e-mail	mwsitar@tnfd.org			rk Phone	603-286-4781
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS		Vice Chair of the State Interoperability Executive Committee					
proprieto	elow the name, address, and type of any profession; or employee, or served in any other profession year. Sources of retirement benefits other than feder	nal or adviso	ery capacity, and from v	vhich an	v income in excess of	£ \$10,000 u	ras derived during the preceding
1.	Dianne Sitar, 125 Vista Heights, Tilton,	NH 0327	6, Beautician, Prop	rietor c	of Dianne Sitar Ha	ir	
2.							
If you hav	e no qualifying income indicate by writing your in	itials next to	the following statement		My income does	not qualify	MS.
discipling	te below whether you or a family member has a spile special interest in an item on this list if a change ealicensee or permittee, or other decision by goverfect on you or a family member than it would on. 1. Any profession, occupation, or business licenters.	in law, a cha ernment affe the general	nge in administrative rul cting the listed business, public:	e, a deci professi	sion whether or not to ion, occupation, group	award a co	ntract grant a license or permit
√ .	profession, occupation, or category of business:	Beautici	10.160.2	in franci	==113LFac(13BCU		· · · · · · · · · · · · · · · · · · ·
2.,	neallicate D. Historatice n 1	Estate, includ developers, a		5. Bank services	ing or financial		ate of New Hampshire, county, or cipal employment
Sys	N.H. Retirement 8. Current use land assessment program		9. Restaurants/ lodging		10. Sale and distribut beverages		
		13. Horse or of gambling	dog racing, or other leg	al forms	14. Education	15,	Water Resources
16.	Agriculture 17. N.H. Business taxes: Profits Tax	Busin Enter	ness Interes prise Tax Dividen	-	18. Optional: S specia	pecify any o	other area in which you have a
I have rea person wi	d RSA 15-A and hereby swear or affirm that the fol ho knowingly falls to comply with the provisions of	egoing infor If this chapte	mation is true and comp r or knowingly files a fals	lete to ti e statem	ne best of my knowled nent shall be guilty of a	ge and beli	ef. RSA 15-A:9 Penalty. Any
Date	1/20/2022		Signature of Filer		MM	14	· · · · · · · · · · · · · · · · · · ·
	10			•			

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03/01