

# 2021 NEW HAMPSHIRE STATEMENT

**Type or Print Clearly**

Full Name Jared Maraio

Primary Occupation Partner, Director Sales/Marketing e-mail jare

Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. Lakes Managem  
 NO ACRONYMS

A. List below the name, address, and type of any profession, business, or other activity in which you are a proprietor, or employee, or served in any other professional or advisory capacity during the calendar year. *Sources of retirement benefits other than federal retirement and/*

- |    |                                    |                                                                                                                                                                                                                                            |
|----|------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. | Winnepesaukee Flagship Corporation | <div style="border: 1px solid black; padding: 5px; width: 100%;"> <p style="margin: 0;"><b>RECEIVED</b></p> <p style="margin: 0;">JAN 19 2021</p> <p style="margin: 0; font-size: small;">NEW HAMPSHIRE<br/>DEPARTMENT OF STATE</p> </div> |
| 2. |                                    |                                                                                                                                                                                                                                            |

If you have no qualifying income indicate by writing your initials next to the form.

B. Indicate below whether you or a family member has a special interest in any reportable special interest in an item on this list if a change in law, a change in discipline a licensee or permittee, or other decision by government affecting the financial effect on you or a family member than it would on the general public.

- |                                     |                                                                                                                                                                                                                                                                                       |                          |                                        |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----------------------------------------|
| <input checked="" type="checkbox"/> | 1. Any profession, occupation, or business licensed or certified by the state. profession, occupation, or category of business: <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; height: 20px; vertical-align: middle;">Tourism/Hospit</span> |                          |                                        |
| <input type="checkbox"/>            | 2. Health Care                                                                                                                                                                                                                                                                        | <input type="checkbox"/> | 3. Insurance                           |
| <input type="checkbox"/>            | 4. Real Estate, including broker, agent, developers, and land                                                                                                                                                                                                                         | <input type="checkbox"/> | 5. Real Estate                         |
| <input type="checkbox"/>            | 7. N.H. Retirement System                                                                                                                                                                                                                                                             | <input type="checkbox"/> | 8. Current use land assessment program |
| <input checked="" type="checkbox"/> | 9. Lodging                                                                                                                                                                                                                                                                            | <input type="checkbox"/> | 10. Other                              |
| <input type="checkbox"/>            | 12. Any business regulated by the Public Utilities Commission                                                                                                                                                                                                                         | <input type="checkbox"/> | 13. Horse or dog of gambling           |
| <input type="checkbox"/>            | 16. Agriculture                                                                                                                                                                                                                                                                       | <input type="checkbox"/> | 17. N.H. Business                      |
| <input type="checkbox"/>            | 18. Business                                                                                                                                                                                                                                                                          | <input type="checkbox"/> | 19. Business                           |