## 2015 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print C	•										
Full Name —	John	4. Par	Ker		Work A	ddress			- 24		
Primary Occupa	ition <u>ReT</u>	red		e-	mail *optional _	Hookra	s11 @ a	ol.Com	Work Phone	603-759	-6495
The office, employment w you. N		ppointment, rnment held	or ————————————————————————————————————	Jate	Conserva	tion	Commi	Tter			
proprietor, or e	mployee, or se	rved in any o	ther profession	onal or ad	visory capacity,	and from	which any	ou or a family memb income in excess o ncluded. (Use addition	f \$10,000 was	derived during	
1. <u>Lo</u>	cal 4,	Ogeret	ing Eng	ry-sec	s, Bosto	n, M6	s s				
2.											
If you have no q	ualifying incom	e indicate by	writing your i	nitials next	to the following	statemen	t.	My income does	not qualify		_
reportable spec	ial interest in an nsee or permitte	item on this lee, or other de	ist if a change cision by gov	in law, a c ernment at	hange in admini ffecting the listed	strative rul	e, a decisio	s, professions, occupa on whether or not to n, occupation, group,	award a contrac	t, grant a licen	se or permit,
1	ny profession, oc sion, occupatior	•		sed or cert	ified by the State	of New H	ampshire.	List each such			_
2. Health	Care 3. Ir	nsurance	1 (		cluding brokers, rs, and landlords		5. Banki services	ng or financial	11	of New Hampsl lemployment	hire, county, or
7. N.H. Retireme	entSystem	11	rrent use land ment progran		9. Restaura lodging	ants/	11	10. Sale and distribut peverages	ion of alcoholic	la <sub>1</sub>	11. Practice of w
12. Any business regulated by the Public Utilities Commission				13. Horse or dog racing, or other legal forms of gambling			14. Education	15. Wa	ter Resources		
16. Agric	ulture	ss Business Interest and 18. Optional: Special into					pecify any othe al interest —	fy any other area in which you have a erest			
I have read RSA person who kno	15-A and hereb owingly fails to c	y swear or affi omply with th	rm that the fo ne provisions	oregoing in of this cha	nformation is true pter or knowing	e and comp ly files a fal	olete to the	e best of my knowled ent shall be guilty of a	ge and belief. misdemeanor	RSA 15-A;9 P RECEIVE	enalty. Any
Date 12/21/2014						Dr	st. (	Parles		DEC 23 20	114
						$\mathcal{L}$	Signatur	e of Reporting Individ		NEW HAMPSH	

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