## **2021 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A**

Type or Print Clearly					
Full Name DAVID WELCH	· · ·	Work Address		•••••	
Primary Occupation RETIRED	e-mail	REPDAWELCH@GMAIL.COM	· · · · · ·	Work Phone	
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	GUARDIAN A	AD LITEM BOARD			 
A. List below the name, address, and type of any profession	n husiness	or other evention in white			 

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 from which 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.)

1. NOKIA BENEFITS RESOURCE CENTER - L7544, PO 7255, RANTOUL, IL 61866-7255 2. If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify

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 reportable 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 permit, discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a greater financial effect on you or a family member than it would on the general public:

Γ.	1. Any profes profession, occ	ssion, occupation, or cupation, or category	business licensed or c of business: N/A	ertified by the State of New	Hampshire. Lis	t each such		
<b>–</b>		3. Insurance		, including brokers, opers, and landlords	5. Banking services	or financial	6. State of N municipal en	lew Hampshire, county, or nployment
Γ,	7. N.H. Retirem System	assess	urrent use land sment program	9. Restaurants/ lodging		Sale and distribut erages		11. Practice of law
12. Any business regulated by the Public   13. Horse or dog racing, or other legal forms   14. Education     Utilities   Commission   15. Horse or dog racing, or other legal forms   14. Education						15. Water	Resources	
16. Agriculture 17. N.H. taxes: Business Business Interest and 18. Optional: Specify any special interest						pecify any other ar I interest —	ea in which you have a	

I have read RSA 15-A and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief. RSA 15 A Print the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.

Date 1/12/2021

Signature of Filer

and awelch

NEW HAMPSHIRE

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