2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly, Full Name Robert W Gullier Work Address 2674 Plumen Hill Re	Alexandria NH 03272
Primary Occupation Retired e-mail *optional bobguldner@hotmail, co-4 Work P	Phone (603) 2170255
Type or Print Clearly Full Name Primary Occupation Retired e-mail *optional bobguldner@hotmail.com Work P Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS Work Address 26'74 Plumer Hill Re e-mail *optional bobguldner@hotmail.com Work P WHVH Board of W	uoua ge/s
A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,00 calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheet)	00 was derived during the preceding
1. Megan Guldner Eyocc	
2.	
If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualifying income indicate by writing your initials next to the following statement.	alify fullz
B. Indicate below whether you or a family member has a special interest in any of the following businesses, professions, occupations, g 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 discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matterior financial effect on you or a family member than it would on the general public:	a contract, grant a license or permit,
1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:	h School S'AUY
I / Hoalth Caro II / Incurance II	5. State of New Hampshire, county, or nunicipal employment
7. N.H. Retirement System 8. Current use land assessment program 9. Restaurants/ lodging 10. Sale and distribution of a beverages	alcoholic — 11. Practice of law
Tale 2. Any business regulated by the Public Utilities Commission Tale 2. Horse or dog racing, or other legal forms of gambling 14. Education Tale 2. The substitution of gambling Tale 2. The subst	15. Water Resources
Total 16. Agriculture 17. N.H. taxes: Profits Tax Business Enterprise Tax Dividends Tax 18. Optional: Specify a special interest and Dividends Tax	any other area in which you have a est
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 person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misde	belief. RSA 15-A:9 Penalty. Any
Date 6/18/2018 / Suthe/ Suffice	RECEIVED
Signature of Reporting Individual	JUN 20 2018
Determine Office of Courts of Characteristics of the Marin Characteristics Decreased All Lorance Marin Characteristics Decreased All Lorance Decreased All	NEW HAMPSHIRE

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

NEW HAMPSHIRE DEPARTMENT OF STATE