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

Type or Print Clearly Full Name Richard C. Bailey, Jr.	Work Address	33 Hazen Dr., Con	cord NH (3301	
	*optional		Work Phone	603.227.0030	
	Fire Standards and Training Commission				
A. List below the name, address, and type of any profession, business, o proprietor, or employee, or served in any other professional or advisory calendar year. Sources of retirement benefits other than federal retirement a	y capacity, and from	which any income in excess of	f \$10,000 was d	erived during the preceding	
1. NH Public Utilities Commission			en i waa isan aa		
2.			grafiningskriversegge erstinde deerstrum		
If you have no qualifying income indicate by writing your initials next to th	ne following statemen	nt. My income does	not qualify	Control of the Contro	
reportable special interest in an item on this list if a change in law, a chang discipline a licensee or permittee, or other decision by government affection financial effect on you or a family member than it would on the general position. 1. Any profession, occupation, or business licensed or certified profession, occupation, or category of business:	ng the listed busines ublic:	s, profession, occupation, group,	or matter would	l potentially have a greater	
2. Health Care 3. Insurance 4. Real Estate, includir agent, developers, an	- 11	5. Banking or financial services		f New Hampshire, county, or employment	
IX IIY	9. Restaurants/ lodging	10. Sale and distribute beverages	ion of alcoholic	11. Practice of law	
12. Any business regulated by the Public Utilities Commission 13. Horse or configuration of gambling	dog racing, or other l	egal forms 14. Education	15. Wat	er Resources	
16. Agriculture 17. N.H. Business Business Enterp		est and ends Tax 18. Optional: S	pecify any other al interest —	area in which you have a	
I have read RSA 15-A and hereby swear or affirm that the foregoing inform person who knowingly fails to comply with the provisions of this chapter. Date 1/4/2018 Return to: Office of Secretary of State, 107 Nor	or knowingly files a f	Signature of Reporting Individ	dual	RSA 15-A:9 Penalty. Any RECEIVED JAN 1 2 2018 NEW HAMPSHIRE DEPARTMENT OF STATE	

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

Type or Print Clearly Richard C. Bailey, Jr.	Work Address	33 Hazen Dr., Con	cord NH 0	3301
Full Name	ail *optional			603.227.0030
Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held		nmissioner, NH Depa	rtment of S	afety
by you. NO ACRONYMS A. List below the name, address, and type of any profession, business proprietor, or employee, or served in any other professional or adviscalendar year. Sources of retirement benefits other than federal retirement	sory capacity, and from	which any income in excess of	\$10,000 was de	rived during the preceding
NH Public Utilities Commission				
2.		e de la regional de la gracia	ararika er	
If you have no qualifying income indicate by writing your initials next to	o the following statemer	nt. My income does i	not qualify	
reportable special interest in an item on this list if a change in law, a chardiscipline a licensee or permittee, or other decision by government affer financial effect on you or a family member than it would on the genera 1. Any profession, occupation, or business licensed or certific profession, occupation, or category of business:	ecting the listed business al public:	s, profession, occupation, group, o		
2. Health Care 3. Insurance 4. Real Estate, incluance agent, developers,		5. Banking or financial services		New Hampshire, county, or employment
7. N.H. Retirement System 8. Current use land assessment program	9. Restaurants/ lodging	10. Sale and distributi beverages	on of alcoholic	In Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse of gambling	or dog racing, or other le	egal forms 14. Education	15. Wate	r Resources
16 Adriculture		est and ends Tax 18. Optional: Specia	ecify any other a interest —	area in which you have a
I have read RSA 15-A and hereby swear or affirm that the foregoing info person who knowingly fails to comply with the provisions of this chapt				
Date 1/4/2018	//-	11/10/11		RECEIVED
	-6	Signature of Reporting Individu	ual	JAN 1 2 2018

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

NEW HAMPSHIRE DEPARTMENT OF STATE