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

Type or Print Clearly								
Full Name Timothy S. Wheelock			Work Address 600 State Street - Suite 1 Portsmosth N					
Primary Occupation	mey	e-mail	+swheelock p	-	Work Phone	663 431-3430	-0380	
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Name the office, position, board or o	commission, board of			-				
directors, etc. or employment w	ith state or county 🖊							
government held by you.	IO ACRONYMS							

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.)

Wheelock how Other 600 state St-Suiter Partsmouth NH 03801 1. 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:

5	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: Procence of Low									
Г	2. Health Care $\[\ \ \ \ \ \ \ \ \ \ \ \ \$	incurance II		te, including brokers, 5. elopers, and landlords serv		ing or financial	6. State of New Hampshire, county, or municipal employment			
Г	7. N.H. Retirement System8. Current use land assessment program			9. Restaurants/ lodging				11. Practice of law		
Г	12. Any business regulated by the Public13. HoUtilities Commissionof gamb			se or dog racing, or other legal forms ring		☐ 14. Education	☐ 15. Water Resources			
Г	16 Agriculture				nterest and ividends Tax	18. Optional: S specia	pecify any other area in which you have a al interest			

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:9 Penalty.** Any person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.

Date

Signature of Filer

SEP 1 7 2021