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

ype or F	Print Clearly		_			
Full Nam	e Richard E. Wyman		Work Address	24 State Route 25, PO	Box 177, Mere	dith, NH 03253
Primary (	Occupation Banking	e-mail*optional	rwyman@mvsb.c	om	Work Phone	(603) 279-9104
directors,	e office, position, board or commission, board of etc. or employment with state or county ent held by you. NO ACRONYMS	Community Developn	nent Finance Auth	ority		
roprieto	elow the name, address, and type of any profession, or employee, or served in any other profession year. Sources of retirement benefits other than feder	nal or advisory capaci	ty, and from which	th any income in exces	s of \$10,000 w	as derived during the preceding
.	Meredith Village Savings Bank, 24 State Route 25, PO Box 177, Meredith, NH 03253					
you hav	re no qualifying income indicate by writing your in	itials next to the follow	ving statement.	My income d	loes not qualify	
eportabliscipline	te below whether you or a family member has a spice special interest in an item on this list if a change is a licensee or permittee, or other decision by gove effect on you or a family member than it would on 1. Any profession, occupation, or business license profession, occupation, or category of business:	in law, a change in adn rnment affecting the li the general public:	ninistrative rule, a sted business, pro	decision whether or not fession, occupation, gro	to award a cor	tract, grant a license or permit,
2.	HASIFO ( STA II 4 INCIITADEA II	Estate, including broke developers, and landlo	iix	Banking or financial vices	11	ate of New Hampshire, county, or cipal employment
_	N.H. Retirement 8. Current use land assessment program	- 11	aurants/	. 10. Sale and distri beverages	ibution of alcoh	nolic
	Any business regulated by the Public ies Commission	13. Horse or dog racion of gambling	ng, or other legal f	orms 14. Education	on	Water Resources
16	. Agriculture 17. N.H. Business taxes: Profits Tax	Business Enterprise Tax	lnterest ar Dividends		al: Specify any opecial interest	other area in which you have a -
have rea	d RSA 15-A and hereby swear or affirm that the for ho knowingly fails to comply with the provisions	regoing information is of this chapter or know	true and complete ringly files a false s	e to the best of my know tatement shall be guilty	vledge and beli of a misdemea	nor.
г			Richard	le Il Shu	an	RECEIVED
Date	August 7, 2018		Sig	nature of Reporting Ind	lividual	AUG 09 2018
	0.00		Charles Charles I I annu	- D 204 Cameand N	JILI 02201	NEW HAMPSHIRE

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