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

Type or Print Clearly	NH Community Loom Full									
Full Name Alan K. Blake	Work Address 7 Wall St. Corcad Ntt 03301									
Primary Occupation Busiless Consultant	e-mail abake 0263@ gma: 1. com Work Phone 6038560708									
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	New Hamphive Judicial Conduct Committee									

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.)

New Hampshire Community Loon Fund plymouth State University 1. 2. If you have no gualifying 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:

		sion, occupation, or l upation, or category			ified by the State	e of New Ha	mpshire.	List each such		
	2. Health Care	3. Insurance			Estate, including brokers, developers, and landlords		5. Banking or financial services		6. State of New Hampshire, county, or municipal employment	
	7. N.H. Retirement 8. Current use System assessment pro							10. Sale and distribut beverages	ion of alcoholic	11. Practice of law
12. Any business regulated by the Public13. Horse or dog rad of gamblingUtilitiesCommission					or other leg	er legal forms 14. Education 15. Water Resources			Resources	
Γ.	16. Agriculture	17. N.H. taxes:	Busine Profits		Business nterprise Tax	– Interes Dividen		18. Optional: Specia	pecify any other are l 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:9 Penalty Arp person who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor. RECEIVED

Date

Signature of Filer

JUN 2 3 2021

NEW HAMPSHIRE DEPARTMENT OF STATE

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