2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	
Full Name William John Oldenburg	Work Address NHDOT, 7 Hazen Drive, Concord, NH 03301
Primary Occupation Civil Engineer	e-mail william.j.oldenburg@dot.nh.gov WorkPhone 603-271-7419
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	Asst. Director of Project Development
	Site Evaluation Committee
proprietor, or employee, or served in any other profession	on, business, or other organization in which you or a family member was an officer, director, associate, partner and or advisory capacity, and from which any income in excess of \$10,000 was derived during the preceding retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)
1.	
2.	
If you have no qualifying income indicate by writing your in	itials next to the following statement. My income does not qualify ,
financial effect on you or a family member than it would on 1. Any profession, occupation, or business licens profession, occupation, or category of business:	sed or certified by the State of New Hampsbire. List each such Riverbend Community Mental Heath
2. Health Care s, insurance agent, o	Estate, including brokers, developers, and landfords 5. Banking or financial municipal employment 6. State of New Hampshire, county, or municipal employment
7. N.H. Retirement 8. Current use land assessment program	9. Restaurants/ 10. Sale and distribution of alcoholic 11. Practice of law
	13. Horse or dog racing, or other legal forms 14. Education 15. Water Resources
16. Agriculture 17. N.H. Business taxes: Profits Tax	Business Interest and 18. Optional: Specify any other area in which you have a
have read RSA 15-A and hereby swear or affirm that the fore person who knowingly falls to comply with the provisions of Date 12/21/2021	egoing information is true and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any f this chapter or knowingly files a false statement shall be guilty of a misdemeanor. Signature of Filer
Return to: Office of Secretary of :	State, 107 North Main Street, State House Room 204, Concord, NH 03301

JAN 06 2022

NEW HAMPSHIRE
DEPARTMENT OF STATE