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Type or Pri	nt Clearly						
Full Name	James W. Dean,	Jr.	. Work Ad	dress 105 l	Main St., 204 Thom	pson Hall, D	urham, NH 03824
Primary Oc	cupation University	/ President	e-mail james.dean@unh.e	du	Wor	k Phone	603-862-2450
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			member, Higher Education Comm., Div. of Higher Education, NH Dept. of Education				
proprietor,	or employee, or ser	ved in any other profession	ion, business, or other organization onal or advisory capacity, and from eral retirement and/or disability bene	n which any	income in excess of	\$10,000 was	derived during the preceding
1. Ur	niversity President,	University of New Hamps	hire, 105 Main St., 204 Thompso	n Hall, Durha	am, NH 03824		
2.	.						
If you have	no qualifying income	e indicate by writing your i	nitials next to the following stateme	ent.	My income does	not qualify	
reportable : discipline a	special interest in an licensee or permitte	item on this list if a change	pecial interest in any of the followin in law, a change in administrative a ernment affecting the listed busines in the general public:	ule, a decisio	n whether or not to a	ward a contra	ict, grant a license or permit,
		cupation, or business licen: , or category of business:	ed or certified by the State of New	Hampshire, L	ist each such		
[[—] 2. Не	ealth Care 🏳 3. In		Estate, including brokers, developers, and landlords	5. Banking services	g or financial		of New Hampshire, county, or al employment
C 7. N. Syste	H. Retirement	8. Current use land assessment program			0. Sale and distributi everages	on of alcohol	c I1. Practice of law
	ny business regulated s Commission	I by the Public	13. Horse or dog racing, or other of gambling	egal forms	X 14. Education	☐ 15. W	ater Resources
16. Agriculture 17. N.H. Business Business Interest and 18. Optional: Specify any other area in which you have 16. Agriculture Profits Tax Enterprise Tax Interest and special interest					er area in which you have a		
I have read person who	RSA 15-A and hereby knowingly fails to co	v swear or affirm that the fo omply with the provisions	of this chapter of Vnovingly files a	nplete to the false stateme	best of my knowled nt shall be guilty of a	ge and belief. misdemeano	RSA 15-A:9 Penalty. Any

Date January 8, 2021

JAN 1 3 2021 Signature of Filer NEW HAMPSHIRE DEPARTMENTOSTIPPERI SOLEW ENDERSTOPPERI

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