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

Type or Print Clearly		03833
Full Name PAND CU, HESS	Work Address 11 SANd Store a	Day, Exotor NH
Primary Occupation Refired	e-mail dave hess a comcast, Net Work Phone	603-801-4790
Name the office, position, board or commission, board of directors, etc. or employment with state or county	Ballot LAW COMMISSION	

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.)

1. NONE 2.

If you have no qualifying income indicate by writing your initials next to the following statement.

NO ACRONYMS

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:

Г	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:									
Γ	2. Health Care	<b>[</b> − 3. In	surance	Г	4. Real Estate, inc agent, develope		Г	5. Banking or financial services	1	New Hampshire, county, or employment
	7 NH Retirem	ent	8 (1	irrent	use land	9 Restaurants/		10 Sale and distributi	ion of alcoholic	11 Practice of

-	System	assessment program	lodging	beverages	l law		
Г	<ul> <li>12. Any business regulated Utilities Commission</li> </ul>	d by the Public 13. H	orse or dog racing, or other lega Ibling	l forms 🖵 14. Educati	on / 15. Water Resources		
Г	16. Agriculture	17. N.H. taxes: Profits Tax	Business Enterprise Tax		18. Optional: Specify any other area in which you have a special 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.

July 26 2021 Date

government held by you.

Signature of Reporting Individual

RECE NEW HAMPSHIRE DEPARTMENT OF STATE

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