

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

Type or Print Clearly

Full Name **Joshua W. Elliott**

Work Address

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Primary Occupation **Division Director**

e-mail

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Work Phone

**603-271-6003**

Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you.  
**NO ACRONYMS**

**Director, Division of Policy and Programs, Department of Energy  
 Member, Drinking Water and Groundwater Trust Fund Advisory Commission**

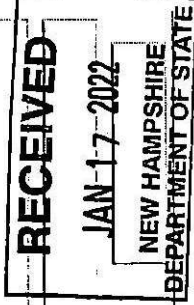
A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was an officer, director, associate, partner, proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 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. **New Hampshire General Court, State Senate. 107 N. Main Street, Concord, NH**

2.

If you have no qualifying 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:

<input type="checkbox"/>	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:	
<input type="checkbox"/>	2. Health Care	<input type="checkbox"/> 3. Insurance
<input type="checkbox"/>	4. Real Estate, including brokers, agent, developers, and landlords	<input type="checkbox"/> 5. Banking or financial services
<input checked="" type="checkbox"/>	7. N.H. Retirement System	<input type="checkbox"/> 8. Current use land assessment program
<input type="checkbox"/>	9. Restaurants/lodging	<input type="checkbox"/> 10. Sale and distribution of alcoholic beverages
<input type="checkbox"/>	11. Practice of law	<input type="checkbox"/> 12. Any business regulated by the Public Utilities Commission
<input type="checkbox"/>	13. Horse or dog racing, or other legal forms of gambling	<input type="checkbox"/> 14. Education
<input type="checkbox"/>	15. Water Resources	<input type="checkbox"/> 16. Agriculture taxes:
<input type="checkbox"/>	17. N.H. Business Profits Tax	<input type="checkbox"/> 18. Optional: Specify any other area in which you have a special interest
<input type="checkbox"/>	19. Dividends Tax	<input checked="" type="checkbox"/> <b>NH 457(b) plan; Travel</b>

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.

Date **01/03/2022**

Signature of Filer