2017 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	06	-0.71CT 7 CT	11. 1 Pue C ONL
Full Name Joseph Bernard Rouchard			House Annex Km119 Concord Nt
Primary Occupation Budget Officer e-ma	ail *optional Joseph, K	budadenh.gov	Work Phone 603-271-3204
The office, position, appointment, or employment with state government held by you. NO ACRONYMS Budget O	fficer - Depart	ment of Administr	ative Services
A. List below the name, address, and type of any profession, business proprietor, or employee, or served in any other professional or adviscalendar year. Sources of retirement benefits other than federal retirement	ory capacity, and from wat and/or disability benefits	which any income in excess o shall be included. (Use addition	f \$10,000 was derived during the preceding nal sheets as necessary.)
1. Granite Case Management, 288 Ba	phist Hill Rd, (Canterbury, NH 0	3224
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 reportable special interest in an item on this list if a change in law, a chard discipline a licensee or permittee, or other decision by government affect financial effect on you or a family member than it would on the general	nge in administrative rule cting the listed business, _l	e, a decision whether or not to	award a contract, grant a license or permit,
Any profession, occupation, or business licensed or certified profession, occupation, or category of business:		mpshire. List each such Cove Providers	
2. Health Care 3. Insurance 4. Real Estate, incluagent, developers,	_	5. Banking or financial services	6. State of New Hampshire, county, or municipal employment
7. N.H. 8. Current use land assessment program	9. Restaurants/ lodging	10. Sale and distribut beverages	ion of alcoholic 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse of gambling	or dog racing, or other leg	al forms 14. Education	15. Water Resources
16 Agriculturo	iness Interes erprise Tax Divider	11 : ' .	pecify any other area in which you have a al interest
I have read RSA 15-A and hereby swear or affirm that the foregoing info person who knowingly fails to comply with the provisions of this chapt			
Date Cm. 19, 2017	Joseph	B. Barchors	RECEIVED
V	\bigvee	Signature of Reporting Individ	ual JAN 19 20 17

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

NEW HAMPSHIRE DEPARTMENT OF STATE