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

Type or Pri	int Clearly				····						
Full Name	Edward *	Ned [®] Gord	lon			Work Addr	ess	69 Pleasant Str ee t,	Bristol, NH 03222		; ;
Primary Oc	cupation	Retired			e-mail	44towne@gmail.com		· · · · · · · · · · · · · · · · · · ·	Work Phone	6037443617	;
Name the office, position, board or commission, board of directors, etc. or employment with state or county					Board Memb	er					
				Gaudian Ad L	item Board				<u> </u>	<u> </u>	
proprietor,	or employ	ee, or ser	ved in any o	other professio	nal or adviso	or other organization i ry capacity, and from and/or disability benefit	which	any income in exe	cess of \$10,000 v	as derived during th	
1. Se	elf - Judicial	Retireme	nt Plan	· · · · · · · · · · · · · · · · · · ·	· - · - · - · ·						
2. Sp	ouse - NH	Retiremen	t Śystem		·····			÷.			······································
If you have	no qualifyi	ng income	indicate by	writing your in	itials next to 1	the following statement	1	My incom	e does not qualify		
discipline a financial eff	licensee or fect on you . Any prof	permittee or a family ession, occ	e, or other de y member th cupation, or l	cision by gove an it would on	rnment affect the general	I by the State of New Ha	profe	ssion, occupation, g	not to award a cor group, or matter w	itract, grant a license over the license of the lic	or permit, a greater
Г 2. Не	ealth Care	3. ln	surance		Estate, includ developers, a	- 11 3	5. Ba servio	anking or financial ces		te of New Hampshire Ipal employment	, county, or
Vi 7. N. Syste	.H. Retirer em	nent		irrent use land ment program	F i	9. Restaurants/ lodging		10. Sale and di beverages	stribution of alcol	iolic II. F Ri law	Practice of
	ny business s Commis		by the Publ		13. Horse or of gambling	dog racing, or other le	jal for	ms 📑 14. Educa	ation 🔽 15.	Water Resources	
16. Agriculture 17. N.H. Business taxes: Profits Tax						Business Enterprise Tax R Dividends Tax R Dividends Tax R Specify any other area in which you have a special interest					
person who	RSA 15-A a b knowingly nuary 12, 20	y fails to co D21	omply with t		CEIVE AN 13 202 N HAMPSH	Signature of Filer STATE STATE	se stat	tement shall be gui	Ity of a misdemea	nor.	aity . Any

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