2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or	Print Clearly				,			
Full Nan	me Kassandra S. An	dinger		: Work Addre	ess 30 Westbour	ne Road, Concord, Ni	H 03301	· · · · · · · ·
Primary	Occupation Homema	ker	e-mail	kspanos@comcast.n	et	Work Phone	603-219-687	'2
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS				System of New Hamps	hire Board of Trust	ees	Western 2 Manager	
propriet	below the name, addrestor, or employee, or set or year. Sources of retires	rved in any other pro	ofessional or adviso	ery capacity, and from t	which any income I	in excess of \$10,000 w	as derived duri	issociate, partnering the preceding
1.	Rath, Young and Pig	natelli, P.C Willian	m Ardinger, attome	ey & shareholder	a common eq	, we will be a facility		+
2.			- Supposition of the second of		, , , , , , , , , , , , , , , , , , ,	a security of a section of the second of the	· ·	
If you ha	ave no qualifying incom	e indicate by writing	your initials next to	the following statement	- My ir	ncome does not qualify		
discipilr	ble special interest in an ne a licensee or permitte al effect on you or a fami 1. Any profession, oc profession, occupation	e, or other decision b ly member than it wo cupation, or business	y government affect huld on the general is licensed or certified	ting the listed business,	profession, occupat	ion, group, or matter w	tract, grant a lice	ense or permit, have a greater
<u> </u>	2. Health Care 5. Ir		4. Real Estate, includ agent, developers, a		5. Banking or finar services		ite of New Hamp ipal employmer	oshire, county, or nt
1 _	7. N.H. Retirement ystem	8. Current us assessment pr		9. Restaurants/ lodging	10. Sale as beverages	nd distribution of alcoh	IDE	11. Practice of law
	2. Any business regulated litles Commission		13. Horse or of gambling	r dog racing, or other leg	pal forms [14.1	Education . 15.	Water Resource	5
Γ 1	16. Agriculture		siness Bush fits Tax Enter		st and 78. nds Tax	Optional: Specify any o special interest —	ther area in whi	ch you have a
	ead RSA 15-A and hereb who knowingly falls to c							Penalty. Any
Date	January 9, 2020	Signature of Reporting Individual						Programme constitution of the second

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Control 9, NH 03301

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NEW HAMPSHIRE DEPARTMENT OF STATE