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

Type or Print Clearly				
Full Name STEPHEN M DU	JPREY	Work Address FOXFIR	E PM 81 HALL ST. CO	ONCORD, NH 03301
Primary Occupation REAL ES	TATE DEVELOPER e-mail SDUI	PREY@FOXFIRENH.COM	M Work Phone	603-228-2151
Name the office, position, board or directors, etc. or employment y government held by you.		FINANCE AUTHORITY		
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.)				
<sup>1.</sup> FoxFire PM, Inc.; Duprey Hospitality,LLC; Capital Hotel Co. I,II,III,IV,V,VI; Granite Place, LLC;				
2. 2 Pillsbury St, LLC; The Duprey Ctr,LLC; Bindery Redevel., LLC; The Duprey Co,LLC; 81 Hall Street, LLC				
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:				
1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:     LAW, REAL ESTATE				
2. Health Care 3. Insur	ance 4. Real Estate, including brok agent, developers, and land			of New Hampshire, county, or al employment
7. N.H. Retirement System	8. Current use land 9. Res   assessment program Iodging	taurants/ 10. Sale beverage	and distribution of alcoholies	c 11. Practice of law
12. Any business regulated by Utilities Commission	of gambling	ing, or other legal forms 14	4. Education 15. Wa	ater Resources
I 16 Agriculture	. N.H. Business Business kes: Profits Tax Enterprise Tax		8. Optional: Specify any othe special interest	er area in which you have a
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 7/27/2022	Signati	ure of Filer	M7	JUL 2 9 70721 NEW HANN STITLE DEPARTMENT OF STATE
Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301				