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

Type or Print Clearly			
Full Name Peter G. Callaghan	Work Address	57 North Main Street, P.O. Box 1318 (	Concord, NH 03302
Primary Occupation Attorney e-mai	il*optional	Work Phone	603.410-1580
The office, position, appointment, or employment with state government held by you.  NO ACRONYMS	Labor Relations Board, Alterna	e Chair	
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	sory capacity, and from which	any income in excess of \$10,000 w	as derived during the preceding
1. Preti Flaherty Beliveau & Pachios			
2. Cleveland Waters & Bass			
If you have no qualifying income indicate by writing your initials next to	o 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 chardiscipline a licensee or permittee, or other decision by government affer financial effect on you or a family member than it would on the general	ange in administrative rule, a d ecting the listed business, profe	ecision whether or not to award a con	tract, grant a license or permit,
Any profession, occupation, or business licensed or certific profession, occupation, or category of business:	ed by the State of New Hamps	nire. List each such	
2. Health Care 3. Insurance 4. Real Estate, incluagent, developers,	- 11		ate of New Hampshire, county, or cipal employment
7. N.H. 8. Current use land assessment program	9. Restaurants/ lodging	<ol><li>Sale and distribution of alcoh beverages</li></ol>	olic 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse of gambling	or dog racing, or other legal fo g	rms	Water Resources
16 Agricultura	siness Interest and terprise Tax Dividends T		other area in which you have a
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			
	70		RECEIVED
Date   115 118	Sigr	nature of Reporting Individual	JAN 0 8 2018

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

NEW HAMPSHIRE DEPARTMENT OF STATE