



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

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JAN 20 2017

NEW HAMPSHIRE DEPARTMENT OF STATE

Type or Print Clearly

Full Name Jane Hirsch Work Address 107 W. Main St., Concord, NH 03301

Primary Occupation Director of Scheduling e-mail \*optional jane.hirsch@nh.gov Work Phone 271-87197

The office, position, appointment, or employment with state government held by you. NO AGRONVMS Scheduling The Office of the Governor, Director of

- 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.)
- The United States Senate, Room 5H-127, Hart Building, Washington, DC  
*Deputy Director of Casework*
  - The Union Leader Corp, PO Box 97575, Manchester, NH 03108,  
Editorial Page Editor  
*20510 7104*
- If you have no qualifying income indicate by writing your initials next to the following statement: My income does not qualify \_\_\_\_\_

*Hirsch, Jane*

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:

<input type="checkbox"/>	1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: _____
<input type="checkbox"/>	2. Health Care
<input type="checkbox"/>	3. Insurance
<input type="checkbox"/>	4. Real Estate, including brokers, agent, developers, and landlords
<input checked="" type="checkbox"/>	7. N.H. Retirement System
<input type="checkbox"/>	8. Current use land assessment program
<input type="checkbox"/>	12. Any business regulated by the Public Utilities Commission
<input type="checkbox"/>	16. Agriculture
<input type="checkbox"/>	17. N.H. Business taxes: <input type="checkbox"/> Profits Tax <input type="checkbox"/> Business Enterprise Tax <input type="checkbox"/> Interest and Dividends Tax
<input type="checkbox"/>	4. Real Estate, including brokers, agent, developers, and landlords
<input type="checkbox"/>	5. Banking or financial services
<input checked="" type="checkbox"/>	6. State of New Hampshire, county, or municipal employment
<input type="checkbox"/>	9. Restaurants/ lodgings
<input type="checkbox"/>	10. Sale and distribution of alcoholic beverages
<input type="checkbox"/>	11. Practice of law
<input type="checkbox"/>	13. Horse or dog racing, or other legal forms of gambling
<input type="checkbox"/>	14. Education
<input type="checkbox"/>	15. Water Resources
<input type="checkbox"/>	18. Optional: Specify any other area in which you have a special interest: _____

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 01/18/17

Jane M. Hirsch  
Signature of Reporting Individual

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