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

**Type or Print Clearly** Full Name 1. 16:55 -Merinant Sychies Curt, Cencord, N. H. Work Address Primary Occupation e-mail Syence Casti (G) (CUTS, STAX. n. SWork Phone. n 53,-5-5-5-5/ Name the office, position, board or commission, board of Auser thember (iniza's directors, etc. or employment with state or county government held by you. NO ACRONYMS 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.) 1. Armah Superier Court, penel auto Cencerd N. 2. Cencer . 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:

		ssion, occupation, or l cupation, or category		tified by the State of New	Hampshire.	List each such	- <u>-</u>	
	2. Health Care	3, Insurance	4. Real Estate, including brokers, agent, developers, and landlords		5. Banking or financial services		6. State of New Hampshire, county, or municipal employment	
Ľ	7. N.H. Retirem System		irrent use land ment program			10. Sale and distributi everages	ion of alcoholic	11. Practice of law
Ľ	12. Any business regulated by the Public 13. Horse or dog racing, or ot of gambling   Utilities Commission				legal forms	14. Education	15. Water Resources	
Γ.	16. Agriculture	17. N.H. taxes:			erest and dends Tax		pecify any other are l interest	ea 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 failse statement shall be quilty of a misdemeanor.

•		RECEIVED	
Date	1/ 1/21	LAN 12 2021	
		JAN 13 2021	Signature of Reporting Individual
	Return to: Office of Secre	AC NEW HAMPSHIRE	r, State House Room 204, Concord, NH 03301
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