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

Type or	Print Clearly						
Full Nam	ne David E Lang Jr.			Work Address	107 N Main St, State Hou	se 204, Conco	ord, NH 03301
Primary	Occupation Project Ma	anager	e-mail david.lang	@sos.nh.gov	Wo	ork Phone	603-271-1463
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS			Project Manager, Pooled	d Risk Manageme	ent Programs		
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.) RECEIVED							
1.	NH Department of Stat	e, 107 N. Main Street, Rm. 20	04, Concord, NH 03301				AUG 19 2021
2.	NH Retirement System Pensioner- 54 Regional DriveConcord, New Hampshire 03301 NEW HAMPSHIRE DEPARTMENT OF STATE						
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:							
<u> </u>	. Health Care	ISHIFADOR IIV	Estate, including brokers developers, and landlor	11	Banking or financial vices		e of New Hampshire, county, or pal employment
IX _	. N.H. Retirement ystem	8. Current use land assessment program	9. Restau lodging	ırants/	 10. Sale and distribute beverages 	tion of alcoho	lic 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms of gambling 14. Education 15. Water Resources							
<u> </u>	6. Agriculture	17. N.H. Business taxes: Profits Tax	Business Enterprise Tax	Interest ar Dividends		pecify any ot al interest	her 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	August 19, 2021		Signature	of Filer /s,	/ David E Lang Jr	25)