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

Type or F	Print Clearly					<u> </u>			
Full Nam	e Louis To	dd Bickford -			ork Address	393 High St. Glencliff	NH 03238		
rimary (Occupation	Administrator		e-mail louis.bickford@	dhhs.nh.go	v ,	Work Phone	603-989-	5203
lirectors,	, .	ion, board or commissi nployment with state ou. NO ACROI	or county	Administrator of Glencliff He	ome, Depart	ment of Health and Hun	man Services.		
roprieto	or, or employ	ee, or served in any of	ther professio	on, business, or other organ nal or advisory capacity, an eral retirement and/or disabilit	d from whic	th any income in excess	ss of \$10,000 w	vas derived -	during the preceding
۱.	Future In Sig	ht, 25 Walker St. Concor	d NH 03301 s	ervices to individuals with vi	ion issues				.
2.		·					•		
f you hav	ve no qualifyi	ng income indicate by v	vriting your in	itials next to the following st	atement.	My income d	loes not qualify		
inancial e	effect on you 1. Any profession, or	or a family member that ession, occupation, or b ccupation, or category o	in it would on usiness licens of business:	ernment affecting the listed by the general public: ed or certified by the State of Vision services Estate, including brokers,	New Hamp				ampshire, county, or
	Health Care N.H. Retiren	3. Insurance	agent, rent use land	developers, and landlords 9. Restaurant		vices 10. Sale and distri	4	municipal employment of alcoholic	
	n.H. Retirer stem		rent use iand nent program	il ' '	* <u> </u>	beverages			law
	Any business lies Commis	regulated by the Public sion	1.1	13. Horse or dog racing, or of gambling	other legal fo	orms 14. Education	on	Water Resou	ırces
	. Agriculture	17. N.H. taxes:	Business Profits Tax	Business Enterprise Tax	Interest an Dividends		l: Specify any o ecial interest —		which you have a
have rea person w	id RSA 15-A a ho knowingly	nd hereby swear or affir y fails to comply with th	m that the for e provisions o	regoing information is true a of this chapter or knowingly f	nd complete iles a false st	to the best of my know atement shall be guilty	ledge and belie of a misdemea	ef. RSA 15- nor.	RECEIVE
Date 1	1-11-2021			Signature of F	iler	Hick	Belle		JAN 12 2021
	·	Return to: Office o	of Secretary of	State, 107 North Main Street	, State House	e Room 204, Concord, N	H 03301		NEW HAMPSHIR DEPARTMENT OF S