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

Type o	r Print Clearly										
Ful <b>l N</b> a	me Courtney L	ockwood				<del>-</del>	Work Addre	ss 6	4 N. Main Street, 3	Brd floor	
'riman	y Occupation At	torney			e-mail	Courtneyl				Work Phone	603-228-0432
lirecto	the office, position rs, etc. or empl ment held by you	loyment v	commiss vith state NO ACRO	or county	Member of t	he State Re	ehabilitation (	ouncil			
	tor, or employee	, OI SCITC	1 111 GHTY C	מופו טוטופצאט	nai or advise	IIV CADACIN	/ አቡብ ከለጡ u	shich a	n you or a family r iny income in exc e included. (Use a		officer, director, associate, partners of the precedires of the preceding of t
	Disability Right	s Center - N	1H	<del></del> -	<u></u>				<u></u>	<u> </u>	<del></del>
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you h	ave no qualifying	income in	dicate by	writing your in	itials next to	the followin	ng statement.		My income	does not qualify	
iscipli:	ne a licensee or pe	ermittee, o a family m sion, occup	r other de ember the ation, or t	cision by gove an it would on ousiness license	rnment affect the general ed or certified	ige in admi ting the list public: 	nistrative rule ed business, p	, a deci profess	ision whathar or n	at to award a con	os, or matters. A person has a tract, grant a license or permit, ould potentially have a greater
	2. Health Care	3. Insura		4. Real I	Attorney Estate, includ developers, a			5. Ban ervice:	king or financial	☐ 6. Sta	ite of New Hampshire, county, or
,	7. N.H. Retireme ystem	nt 🗔		rrent use land ment program		9. Restau lodging	irants/		10. Sale and dis beverages	tribution of alcoh	
	2. Any business re- lities Commissio		the Publi	11 1	13. Horse or	dog racing	, or other leg	l form		tion [] 15.	Water Resources
] 1	16. Agriculture	17. tax	N.H. es:	Business Profits Tax	Busir	ness prise Tax	Interest		18. Option	nal: Specify any o special interest —	ther area in which you have a
nave re erson :	ead RSA 15-A and who knowingly fa 01/13/2021	hereby sw ils to comp	ear or affi bly with th	R Provisions o	egoing inform f this chapter ECEIV	FOR KNOWIN FED  Signature	ue and compl oly files a fals	ete to 1	the best of my kno ment shall be guilt	owledge and belie ty of a misdemean	ef. RSA 15-A:9 Penalty. Any
		Return	to: Office	of Secretary <b>M</b> S		<b>SHIJRE</b> n St	treet, State Ho	use Ro	); om 204, Concord,	NH 03301	