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

Type or Print Clearly
Full Name Lindsey Lee Laliberte work Address 605 Mast Rd Manchester NH 031
Primary Occupation Pharmais + e-mail *optional Malibertechannafor Work Phone 6036264366
The office, position, appointment, or employment with state government held by you.  NO ACRONYMS  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.)
. Hannaford Pharmacy 605 Mast Rd Manchester NH03102, Pharmacist
Spencer Martin Barber Shop Rt 101 BECL Forch NH Barber
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
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Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301

NEW HAMPSHIRE DEPARTMENT OF STATE