2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type o	r Print Clearly						
Full Na	me Lisa M. Drabik			Work Addres	Londonderry T	own Hall, 268 B Ma	mmoth Rd, Londonderry, NH
Primar	y Occupation Assistant	Town Manager/HR Directo	e-mail	ldrabik@londonderrynh.	org	Work Phone	(603) 432-1100 x150
Name the office, position, board or commission, board of 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.	Lisa Drabik, 21 King Art	hur Drive, Londonderry, NH; A	ssistant To	own Manager, Town of Lo	ndonderry, NH		
2. Jon Drabik, 21 King Arthur Drive, Londonderry, NH; General Manager, Buxton Oil, Epping, NH							
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:							
	2. Health Care 🏳 3. Ins			- 11	. Banking or financ rvices		ite of New Hampshire, county, or ipal employment
	7. N.H. Retirement System	8. Current use land assessment program		9. Restaurants/ lodging	 10. Sale and beverages 	l distribution of alcoh	olic 11. Practice of law
12. Any business regulated by the Public 13. Horse or dog racing, or other legal forms 14. Education 15. Water Resources Utilities Commission of gambling 14. Education 15. Water Resources							
Г	16 Agriculture	17. N.H. Business taxes: Profits Tax		ness Interest rprise Tax Dividenc		otional: Specify any o special interest	ther 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. RECEIVED							
Date	5/8/2020			Arsa V	gnature of Reportir	ng Individual	MAY 1 1 2020

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301

NEW HAMPSHIRE DEPARTMENT OF STATE \checkmark