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

Type o	or Frince Creatily				
Full Na	ame Joseph A Cherniske	Work Address	33 Capitol Street Conce	ord NH	
Primar	ry Occupation Attorney	e-mail Joseph.A.Chemiske@doj.n	h.gov W	/ork Phone 603.271,1296	
directo	the office, position, board or commission, board ors, etc. or employment with state or comment held by you. NO ACRONYMS	New Hampshire Office of the Attorney G	ieneral, Attorney		
proprie	below the name, address, and type of any protector, or employee, or served in any other protector. Sources of retirement benefits other that	efessional or advisory capacity, and from which	h any income in excess	of \$10,000 was derived during the a	, partner preceding
1.	New Hampshire Office of the Attorney Gene	ral		·	
2.	Merrimack County Attorney's Office		•		
If you h	nave no qualifying income indicate by writing y	our initials next to the following statement.	My income do	es not qualify	
reporta discipli	cate below whether you or a family member ha able special interest in an item on this list if a ch ne a licensee or permittee, or other decision by al effect on you or a family member than it wou	ange in law, a change in administrative rule, a c government affecting the listed business, prof ald on the general public:	decision whether or not to fession, occupation, group	award a contract grant a license or or	
ΙX;	 Any profession, occupation, or business I profession, occupation, or category of busine 	licensed or certified by the State of New Hamps SSS: Attorney	shire. List each such		
<u> </u>		Real Estate, including brokers, gent, developers, and landlords	Banking or financial ices	6. State of New Hampshire, cou	unty, or
S	7. N.H. Retirement 8. Current use system assessment pro	gram J lodging	10. Sale and distribu beverages	rtion of alcoholic 11. Pract	tice of
Util	indes Commission	13. Horse or dog racing, or other legal for of gambling	14. Education	15. Water Resources	
		ness Business Interest and ts Tax Enterprise Tax Dividends T	d 18. Optional: spec	Specify any other area in which you ha ial interest	ive a
i have re person v	ead RSA 15-A and hereby swear or affirm that the who knowingly fails to comply with the provision	he foregoing information is true and complete ons of this chapter or knowingly files a false st	to the best of my knowled atement shall be guilty of	dge and belief. RSA 15-A:9 Penalty. a misdemeanor.	Any
Date	01/14/2021	Sigr	agurdo Reporting Individ	fual	
	Return to: Office of Secreta	ary of State, 107 North Main Street, State House	Room 204, Concord, NH	03301	

JAN 1:5 2021
NEW HAMPSHIRE
DEPARTMENT OF STATE