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 - Interest and Dividends Tax - Interest -	2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A			
Primary Occupation	Type or Print Clearly Full Name <u>Janet Swim Reed</u> Work Add	ress POBOX 370, 31 DID Nashua Rd, Amberst NH		
All the blow the name, address, and type of any profession, business, or other organization in which any income in excess of \$10,000 was derived during the preceding calendar year. A. Ust below the name, address, and type of any profession, business, or other organization in 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. 2. 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 a mem on this lift of 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 permit, discipline a licensee or permit, discipline a licensee or permit, the organization in twould on the general public: 1. 1. 2. 1. 2. 1. 3. Indicate below whether you or a family member has a special interest in any of the following businesses, profession, occupation, group, or matters. A person has a reportable special interest in a may of the following businesse, profession, occupation, or categon of business: 1. 1. 2. 1. 3. 1. <t< td=""><td>Primary Occupation Derector e-mail *optional</td><td>reed or sec. org Work Phone 603-673-6656</td><td>></td></t<>	Primary Occupation Derector e-mail *optional	reed or sec. org Work Phone 603-673-6656	>	
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. 2. 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 license or permit, discipline a license or permit, discipline a license or permit, nor or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or cutegory of business: 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. Insurance 4. Real Estate, including brokers, services 5. Banking or financial 6. State of New Hampshire, county, or municipal employment 3. You H, Retirement 8. Current use land 9. Restaurants/ 10. Sale and distribution of alcoholic 11. Practice of law 1. 1. Apy business regulated by the Public 13. Horse or dog racing, or other legal forms	directors, etc. or employment with state or county government held Disabi	lities		
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Signature of Reporting Individual NOV 1 3 2018				
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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