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

Type or F	Print Clearly		_		<u> </u>	·
Full Nam	e Jay Knower		Work Address	50 Highland Stree	t, Plymouth, NH 03	264
Primary (Occupation small business owner	e-mail Jayknowe	er@gmail.com		Work Phone	603-238-3283
directors,	e office, position, board or commission, board of , etc. or employment with state or county ent held by you. NO ACRONYMS	College Tuition Saving	s Plan Advisory Co	ommission		
proprieto	elow the name, address, and type of any profess or, or employee, or served in any other profession year. Sources of retirement benefits other than fed	onal or advisory capaci	ty, and from which	ch any income in ex	kcess of \$10,000 w	as derived during the preceding
1,	Knower Academics, LLC. 50 Highland Street, Plymouth, NH 03264					
2.	Highland House, LLC. PO Box 811, Plymouth, NH 03264					
If you ha	· ve no qualifying income indicate by writing your i	nitials next to the follow	ing statement.	Myincon	ne does not qualify	,
discipling financial	e a licensee or permittee, or other decision by goverfect on you or a family member than it would on 1. Any profession, occupation, or business licenter profession, occupation, or category of business:	the general public:	tate of New Hamp	**		vould potentially have a greater
<u> </u>		l Estate, including broke , developers, and landic	· II	Banking or financial vices		ate of New Hampshire, county, or cipal employment
Í ::	. N.H. Retirement 8. Current use land assessment program	II	aurants/		listribution of alcol	nolic 11. Practice of law
	. Any business regulated by the Public lities Commission	13. Horse or dog racio of gambling	ng, or other legal i	14. Edu		. Water Resources
<u>Γ</u> 1	6. Agriculture 17. N.H. Rusiness taxes: Reprofits Taxes	IY	Interest a Dividends		ional: Specify any o special interest –	other area in which you have a
I have re	ead RSA 15-A and hereby swear or affirm that the form the swear or affirm that the form the provisions	oregoing information is of this chapter or know	true and complet ringly files a false (e to the best of my k	nowledge and beli uilty of a misdemea	ief. RSA 15-A:9 Penalty. Any inor.
Date	January 4, 2021	<u></u>		Illin		RECEIVED
	, , , , , , , , , , , , , , , , , , , ,		S	nature of Reporting	Individual ⁻	JAN 1 9 2021
	Poturn to: Office of Secretary	of State 107 North Main	Street State Hou	se Room 204. Conco	rd. NH 03301	

NEW HAMPSHIRE DEPARTMENT OF STATE