\checkmark

2018 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly		121 014	160 0040	12011	H, 03304
Full Name ELIZABETH H. TILLOTSON		s <u>2751 AIV</u>			
Primary Occupation Regulatory Compliance e-mail *0 PSWER GENERATION	ptional			Work Phone	603-634-2440
	AIR RE	SOURCES	S COUNC	IL ME	EMBER
Name the office, position, board or commission, committee, 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 operating the profession of the profession of advisory of the profession of advisory of the profession of the professi	capacity, and f	rom which any in	ncome in excess of	\$10,000 was	derived during the preceding
1. EVERSOURCE ENERGY, 780 N comme	RCIAL	MANKHES.	TERNH, F	ower (GENERATION
2. DIC Construction, HINGHAM MA, CONSTRUCTION SERVICES					
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: EMPLOYEE OF GRANITE SHORE POWER (POWER CENERATION)					
2. Health Care 3. Insurance 4. Real Estate, including agent, developers, and I	I	5. Banking services	or financial		of New Hampshire, county, or I employment
	Restaurants/ lging	11	Sale and distribution	on of alcoholic	11. Practice of law
Utilities Commission 12. Any business regulated by the Public of gambling	; racing, or oth	er legal forms	14. Education	15. Wa	ter Resources
16. Agriculture 17. N.H. Business Business Enterprise		iterest and vidends Tax	18. Optional: Sp special	ecify any othe interest	r area in which you have a
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.					
Date Jebruary 7, 2018	Elizab	Ethe K. Vil	lotson		RECEIVED
		Signature of Reporting Individual FEB 0 3 2.14			
Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301 NEW HAMPS IRE DEPARTMENT OF STATE					