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

Type or Print Clearly Full Name Catherine Anne Provencier	University System of NH Work Address 5 Chenell Dr Swite 301 Concord NH 03301
Primary Occupation Vice Chancellor & Treasurer e-mail *	*optional Catherine provencher @ ush. Work Phone 603-862-1622
Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	Board of Directors, Business Finance Authority
proprietor, or employee, or served in any other professional or advisory	or other organization in which you or a family member was an officer, director, associate, partner, or capacity, and from which any income in excess of \$10,000 was derived during the preceding and/or disability benefits shall be included. (Use additional sheets as necessary.)
1. University System of NH (see	e address and position above)
If you have no qualifying income indicate by writing your initials next to the	e following statement. My income does not qualify
reportable special interest in an item on this list if a change in law, a change discipline a licensee or permittee, or other decision by government affectin financial effect on you or a family member than it would on the general put. 1. Any profession, occupation, or business licensed or certified by	by the State of New Hampshire. List each such
profession, occupation, or category of business:	ng brokers, _ 5. Banking or financial _ 6. State of New Hampshire, county, or
2. Health Care 3. Insurance agent, developers, and	
	9. Restaurants/ odging 10. Sale and distribution of alcoholic law 11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse or do of gambling	log racing, or other legal forms 14. Education 15. Water Resources
16. Agriculture 17. N.H. Business Busine Enterpr	interest and Dividends Tax Div
I have read RSA 15-A and hereby swear or affirm that the foregoing information person who knowingly fails to comply with the provisions of this chapter of	ation is true and complete to the best of my knowledge and belief. RSA 15-A:9 Penalty. Any or knowingly files a false statement shall be guilty of a misdemeanor.
Date 10 11 2018	Cathein River RECEIVED
	Signature of Reporting Individual OCT 1 2 2018
Return to: Office of Secretary of State, 107 Nort	th Main Street, State House Room 204, Concord, NH 03301 NEW HAMPSHIRE DEPARTMENT OF STAT