2022 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	
Full Name Thomas N. Thomson Hork Address 173 Strawberry Hill Rd.	Orford NH 0377
	53-4488
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS NO	or, associate, partner,
1. Owner of Thomson Family Tree Farm AKA-Conn, Valley Wood 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 matter 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 discipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potent financial effect on you or a family member than it would on the general public:	n Hannan annamaté
1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business: Certified NH Tree Farmer	
agent, developers, and landlords services municipal employs	ampshire, county, or ment
7. N.H. Retirement System 8. Current use land assessment program 9. Restaurants/ lodging 10. Sale and distribution of alcoholic beverages	11. Practice of law
12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or other legal forms of gambling 14. Education 15. Water Resources	
16. Agriculture 17. N.H. taxes: Business Enterprise Tax Business Enterprise Tax Interest and Dividends Tax 18. Optional: Specify any other area in viscosity and special interest—	which you have a
I 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-person who knowlngly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.	
Date 12 - 5 - 2022	RECEIVED
12-3-2022 Signature of Filer homas N. Momeon	DEC 0 7 2022 NEW HAMPSHIRE
Return to: Office of Secretary of State 107 North Main Street, State House Room 204, Concord, NU 02201	DEPARTMENT OF BUSINE