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

Type or Print Clearly					
Full Name Susan & L	imbert	Work Address	109 Pleasa	int st, Co	ncord
Primary Occupation Audite	e-	Susan. E. lambe	rt @ NH.govW	ork Phone 60	3-230-5911
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS		Department qu l'evenue			
A. List below the name, address, an proprietor, or employee, or served calendar year. Sources of retirement	n any other professional or a	dvisory capacity, and from wh	ich any income in excess	of \$10,000 was derive	d during the preceding
1. G-OVEY MOVS 2. I Eagle Sall f you have no qualifying income ind	office of Concord	Relief &	Recovery My income doe		
B. Indicate below whether you or a freportable special interest in an item discipline a licensee or permittee, or financial effect on you or a family me	on this list if a change in law, a other decision by government mber than it would on the ger	change in administrative rule, a affecting the listed business, pr	a decision whether or not to ofession, occupation, group	o award a contract, grai	nt a license or permit,
profession, occupation, or c				and the second s	
2. Health Care 3. Insura	nce III	- 1	. Banking or financial	6. State of New municipal empl	v Hampshire, county, or loyment
7. N.H. Retirement System	8. Current use land assessment program	9. Restaurants/	10. Sale and distribution	ution of alcoholic	11. Practice of law
12. Any business regulated by Utilities Commission	he Public 13. Ho of gamb	rse or dog racing, or other legal iling	forms 14. Education	15. Water Re	sources
16. Agriculture 17. I		Business Interest a Enterprise Tax Dividend		Specify any other area cial interest	in which you have a
I have read RSA 15-A and hereby swe person who knowingly fails to comp				_	15-A:9 Penalty. Any RECEIVED
Date 1/14/2021		Jusa	ignature of Reporting Indivi	idual	JAN 2 0 2021