2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

ı ype o	r Print Clearly								
Fuii Na	me Robert M.	Buxton			Work A	ddress	39 Ferry Street	, Hudson, NH 03051	
Primar	y Occupation F	ire Chief		e-mail	rbuxton@hudsonn	h.gov		Work Phone	603-880-0371
directo	the office, position rs, etc. or emp ment held by yo	ployment w	commission, board ith state or cou IO ACRONYMS	fire Standard	ds and Training Com	mission			
brobile	tor, or employe	e, or served	in any other profe	essional or adviso	ory capacity, and fro	om which	i anv income in	nily member was an one excess of \$10,000 vides additional sheets a	officer, director, associate, partne vas derived during the preceding as necessary.)
1.									
2.									
lf you h	ave no qualifying	g income ind	icate by writing yo	ur initials next to t	the following statem	nent.	My inc	ome does not qualify	RAB
disciplir	ne a licensee or pulled the special interest on you o	permittee, or or a family me	on this list if a cha other decision by o mber than it would	nge in law, a chan government affect d on the general p	ge in administrative ting the listed busing public:	rule, a de ess, profe	ecision whether ession, occupatio	or not to award a cor on, group, or matter w	os, or matters. A person has a stract, grant a license or permit, would potentially have a greater
⊠	profession, occ	upation, or c	ategory of business lic	censed or certified Electricians	by the State of New Board	v Hampsh	nire. List each su	<u>ıch</u>	
		3. Insurai	ag	Real Estate, includi ent, developers, a		5. B	anking or financ		ate of New Hampshire, county, or cipal employment
⊠ S	7. N.H. Retireme ystem		8. Current use I assessment prog	13 1	Restaurants/ lodging		10. Sale and beverages	distribution of alcoh	olic 11. Practice of law
□ Util	. Any business re ities Commissio	on.	<u></u>	13. Horse or of gambling	dog racing, or other	legal for	ms 🔀 14. Ed	lucation 15.	Water Resources
1	6. Agriculture	17. N taxe	,			erest and idends Ta	18. O	ptional: Specify any o special interest	ther area in which you have a
have re person v	ead RSA 15-A and who knowingly f	d hereby swe ails to compl	ar or affirm that th y with the provisio	e foregoing inforn ns of this chapter	nation is true and co or knowingly files a	mplete t false sta	o the best of my tement shall be	knowledge and belieguilty of a misdemean	ef. RSA 15-A:9 Penalty. Any nor.
Date	1/17/2020				Fres	M. Z	Set		RECEIVED
•			<u> </u>			Signa	ature of Reportir	ng Individual	JAN 2 1 2020

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301

NEW HAMPSHIRE DEPARTMENT OF STATE