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

Type or Print Clearly	<u> </u>		
Full Name JUDY WILLIAMS	Work Address	101 GREEN KI	D / AYMOND NH
Primary Occupation REALTOR BOOKER e-mail JUD	y C Ju oy WIL	LIAMS REISOM	603-895-9718
Name the office, position, board or commission, board of REALTORING directors, etc: "or employment with state or county government held by you. NO ACRONYMS	BOARD of n	ANUFACTURE Hou	SING

A. List below the name, address, and type of any profession, business, or other organization in which you or a family member was an officer, director, associate, partner, proprietor, or employee, or served in any other professional or advisory capacity, and from which any income in excess of \$10,000 was derived during the preceding calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)

1. KEAL ESTATE 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 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 profe profession, oc					or cert	ified by the Sta	<u>te of</u>	New Ha	mpshire.	List	each such			
2. Health Care	📋 3. lr	nsurance			I. Real Estate, including brokers, agent, developers, and landlords			5. Banking or financial		6. State of New Hampshire, county, or municipal employment				
7. N.H. Retirement 8. Current use System assessment pro							10. Sale and distribution of alcoholic beverages		ion of alcoholic		11. Practice of law			
 12. Any business regulated by the Public Utilities Commission 13. Horse or dog racing, or ot of gambling 							ther leg	al forms		14. Education	15. Water Resources			
16. Agriculture	·	17. N.H. taxes:		usiness ofits Tax	1 1 -	Business nterprise Tax		Interes Divider			18. Optional: Sj specia	pecify any other are al interest	ea in w	hich 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-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.

1-12-2021 Date

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Signature of Reporting Individual

JAN 1 4 2021

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

NEW HAMPSHIRE