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

Type or Print Clearly		4.0	
Full Name Ann Finn-Waddell	Work Address <u>203 しい</u>	vell Road, Hudson, NH	0305/
Primary Occupation Resident Care Director (Nurse) e-ma	il*optional_amfw7@a	701 COM Work Phone Go	03.816.0070
Name the office, position, board or commission, committee, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	LPN Member NH BON		
A. List below the name, address, and type of any profession, business, proprietor, or employee, or served in any other professional or adviso calendar year. Sources of retirement benefits other than federal retirement	ory capacity, and from which any i	income in excess of \$10,000 was deri	ved during the preceding
1.			44004
2.			
f you have no qualifying income indicate by writing your initials next to t	the following statement.	My income does not qualify	
3. Indicate below whether you or a family member has a special interest reportable special interest in an item on this list if a change in law, a chan discipline a licensee or permittee, or other decision by government affect inancial effect on you or a family member than it would on the general part of the permitted of the general part of the general p	ge in administrative rule, a decision ting the listed business, profession, public: I by the State of New Hampshire. Li	whether or not to award a contract, g occupation, group, or matter would po	rant a license or permit,
profession, occupation, or category of business: NH (
2. Health Care 3. Insurance 4. Real Estate, including agent, developers, a		g or financial 6. State of No municipal em	ew Hampshire, county, or ployment
 7. N.H. Retirement System 8. Current use land assessment program). Sale and distribution of alcoholic verages	11. Practice of law
 12. Any business regulated by the Public Utilities Commission 13. Horse or of gambling 	dog racing, or other legal forms	14. Education 15. Water F	Resources
16. Agriculture 17. N.H. Business Businest taxes: Profits Tax Enter	ness Interest and Prise Tax Dividends Tax	 18. Optional: Specify any other are special interest — 	ea in which you have a
have read RSA 15-A and hereby swear or affirm that the foregoing infornerson who knowingly fails to comply with the provisions of this chapter			A 15-A:9 Penalty. Any
Date 12/29/2017	annon	Neddell	See See Los II & Francis
	Signature o	f Reporting Individual	+ RECEIVE

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

JAN 17 2018

NEW HAMPSHIRE DEPARTMENT OF STATE