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

2. Health Care 3. Insurance agent, developers, and landlords services municipal employment  7. N.H. Retirement System 8. Current use land assessment program lodging beverages 11. Practice law  12. Any business regulated by the Public of gambling 14. Education 15. Water Resources  16. Agriculture 17. N.H. Business Business Interest and taxes: Profits Tax Enterprise Tax Dividends Tax Special interest  16. Agriculture 17. N.H. taxes: Profits Tax Enterprise Tax Dividends Tax Special interest  18. Optional: Specify any other area in which you have special interest  19. Restaurants/ 10. Sale and distribution of alcoholic law  11. Practice law  12. Any business regulated by the Public law  13. Horse or dog racing, or other legal forms law  14. Education 15. Water Resources  16. Agriculture 17. N.H. Business Enterprise Tax Dividends Tax Specify any other area in which you have special interest  18. Optional: Specify any other area in which you have special interest  18. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Agriculture 19. Optional: Specify any other area in which you have special interest  19. Optional: Specify any other area in which you have special interest  19. Optional: Specify any other area in which you have special							nt Clearly	ype or P
me the office, position, board or commission, board of ectors, etc. or employment with state or county wernment held by you.  NO ACRONYMS  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, 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 prefendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)  Indicate below whether you or a family member has a 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 permittee, or other decision by government affecting the listed business, profession, occupation, group, or matters would potentially have a greancial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care  3. Insurance  4. Real Estrate, including brokers, profession, occupation, group, or matter would potentially have a greancial effect on you or a family member than it would on the general public:  7. N.H. Retirement  8. Current use land  9. Restaurants/ lodging  10. Sale and distribution of alcoholic  11. Practic beverages  11. Any business regulated by the Public  12. Any business regulated by the Public  13. Horse or dog racing, or other legal forms  14. Education  15. Water Resources  16. Sarts of New Hampshire, cour municipal employment  17. N.H. Business  18. Business  19. Restaurants/  10. Sale and distribution of alcoholic  11. Practic beverages  11. Any business regulated by the Public  12. Any business regulated by the Public  13. Horse or dog racing, or other legal forms  14. Education  15. Water Reso	Work Address 107 Pleasant Street, Johnson Hall, Concord, NH 03301	Work Address			dile	e N. Verdi	Stephani	ıll Name
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, p prietor, 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 pre- endar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)    SNV	e-mail stephanie.n.verdile@osi.nh.gov Work Phone 271-1765	e.n.verdile@osi.nh.gov Work Phor			l Planner	Principal	cupation [	nary O
prietor, 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 presendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)  Due have no qualifying income indicate by writing your initials next to the following statement.  My income does not qualify  SNV  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 ortable 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 penipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a greincial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care	Dept of Transportation: Scenic By-Ways Council and Complete Streets Advisory Committee	on: Scenic By-Wa	NH Dept of Transportati	e or county 🛓	nt with state	nploymen	etc. or em	ectors,
ndicate 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 brable 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 per ipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a grencial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care	or advisory capacity, and from which any income in excess of \$10,000 was derived during the precedi	and from which	nal or advisory capacity	other profession	erved in any o	ee, or ser	or employe	orietoi
ndicate 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 prable 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 per ipline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a gre incial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care	·							
ndicate 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 ortable 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 per ripline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a gre incial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care  3. Insurance  4. Real Estate, including brokers, agent, developers, and landlords  7. N.H. Retirement  System  8. Current use land logging  9. Restaurants/  lodging  10. Sale and distribution of alcoholic law beverages  12. Any business regulated by the Public of gambling  13. Horse or dog racing, or other legal forms lated taxes:  14. Education  15. Water Resources  16. Agriculture  17. N.H. Business logging  18. Optional: Specify any other area in which you have special interest —  we 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. A son who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.								
ortable 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 peripline a licensee or permittee, or other decision by government affecting the listed business, profession, occupation, group, or matter would potentially have a green nicial effect on you or a family member than it would on the general public:  1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business:  2. Health Care	next to the following statement.  My income does not qualify  SNV	g statement.	itials next to the followir	writing your ini	ne indicate by	ng incom	no qualifyir	u hav
7. N.H. Retirement System Business Business Of gambling Interest and taxes: Profits Tax Enterprise Tax Dividends Tax System Interest and taxes: Profits Tax System Interest and taxes Interest In	ent affecting the listed business, profession, occupation, group, or matter would potentially have a greater general public:	ed business, profe	rnment affecting the list the general public:	ecision by gover nan it would on business license	ee, or other de illy member th ——— ccupation, or l	permitte or a famil ession, oc	licensee or fect on you . Any profe	ipline ncial e
System					Insurance	3. Ir	ealth Care	2. H
Utilities Commission  Of gambling  14. Education  15. Water Resources  16. Agriculture  17. N.H. taxes:  Business Business Control Dividends Tax  Dividends Tax  Business Control Dividends Ta			11 1			nent		_
16. Agriculture taxes: Profits Tax Enterprise Tax Dividends Tax special interest—  ve 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. A son who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.		or other legal fo			ed by the Publi			
son who knowingly fails to comply with the provisions of this chapter or knowingly files a false statement shall be guilty of a misdemeanor.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						Agriculture	16.
Մարք Լասու ( - փուս								
te January 12, 2021 Signature of Filer Stephanie N. Verdile		of Filer	Signature			021	nuary 12, 20	te [