V

2015 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

| Type or Print Clearly | | . 01 | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------|
| Full Name JOAN MARCOUX | Work Address _ | 129 Pleasant | 57 |
| Primary Occupation Lom musication 1 Specialist | e-mail *optional jma | 129 Pleasant | Work Phone 613-271-90 |
| The office, position, appointment, or $-\!-\!$ | CKOFFICCIO - GOSE | noz's Commis | sion on Disability |
| A. List below the name, address, and type of any proprietor, or employee, or served in any other procealendar year. Sources of retirement benefits other than | essional or advisory capacity, and fror | n which any income in excess of | \$10,000 was derived during the preceding |
| 1. | | | |
| 2. | | | |
| If you have no qualifying income indicate by writing yo | our initials next to the following statemo | ent. My income does | not qualify <u> </u> |
| B. Indicate below whether you or a family member has reportable special interest in an item on this list if a cha discipline a licensee or permittee, or other decision by financial effect on you or a family member than it wou | ange in law, a change in administrative government affecting the listed busine | rule, a decision whether or not to | award a contract, grant a license or permit, |
| Any profession, occupation, or business l profession, occupation, or category of busine | | Hampshire. List each such | |
| | Real Estate, including brokers, gent, developers, and landlords | 5. Banking or financial services | 6. State of New Hampshire, county, or municipal employment |
| 7. N.H. RetirementSystem 8. Current use assessment pro | 11 1 | 10. Sale and distribute beverages | ion of alcoholic 11. Practice of law |
| 12. Any business regulated by the Public Utilities Commission | 13. Horse or dog racing, or other of gambling | legal forms 14. Education | ☐ 15. Water Resources |
| | | | pecify any other area in which you have a al interest |
| I have read RSA 15-A and hereby swear or affirm that t person who knowingly fails to comply with the provisi | | | |
| Date | | Over Masson | RECEIVED |
| | | Signature of Reporting Individ | IAN 1 3 2015 |

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

NEW HAMPSHIPE DEPARTMENT OF STATE