

# 2021 NEW HAMPSHIRE STATEMENT

**Type or Print Clearly**

Full Name Jared Maraio

Primary Occupation Partner, Director Sales/Marketing e-mail jared

Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. Lakes Management  
**NO ACRONYMS**

A. List below the name, address, and type of any profession, business, or other activity in which you are a proprietor, or employee, or served in any other professional or advisory capacity during the calendar year. *Sources of retirement benefits other than federal retirement and/*

1. Winnepesaukee Flagship Corporation
2.

If you have no qualifying income indicate by writing your initials next to the following:

B. Indicate below whether you or a family member has a special interest in any item on this list if a change in law, a change in discipline a licensee or permittee, or other decision by government affecting the item has a financial effect on you or a family member that is greater than it would have on the general public:

1. Any profession, occupation, or business licensed or certified by the state:  
Tourism/Hospitality

2. Health Care       3. Insurance       4. Real Estate, including broker, agent, developers, and land

7. N.H. Retirement System       8. Current use land assessment program       9. Lodging

12. Any business regulated by the Public Utilities Commission       13. Horse or dog of gambling

16. Agriculture       17. N.H. Business       Business