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

Full Name PAUL J. Uoyd	Work A	ddress 158	Liberty SL.	Concorro,	NG 033001
		AL64 Co	(
Name the office, position, board or commission, committee, board of	NH	VERERANS	BOAND	of MANAGE	13
directors, etc. or employment with state or county government held by you. NO ACRONYMS					

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.	N/A		
2.	N/A		
If you have	no qualifying income indicate by writing your initials peyt to the following statement	My income does not qualify	

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

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 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. I	nsurance		ers, and landlords	5. Banki services	ing or financial	— 6. State of Ne municipal emp	w Hampshire, county, or ployment
Γ	7. N.H. Retirement System	1	rrent use land ment program	9. Restaurants/ lodging	11 .	10. Sale and distribution beverages	on of alcoholic	11. Practice of law
Γ	12. Any business regulate Utilities Commission	d by the Public	c 13. Hor of gamb	se or dog racing, or oth ling	ner legal forms	14. Education	15. Water Re	esources
	16. Agriculture	17. N.H. taxes:			nterest and Dividends Tax		ecify any other area interest	a in which 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. RECEIVED

2/27/2013 Date

sef. U Signature of Reporting Individual

MAR 0 2 2018

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

NEW HAMPSHIRE DEPARTMENT OF STATE