## NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A -- RETURN TO STATE HOUSE ROOM 204

Type or Print Clearly		
Full Name Claime D. Clauke	Work Address	
Primary Occupation Retired	e-mail *optional	Work Phone
Name(s) of office, appointment, or employment with government		

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.

1.	NH Rationment System	JAN 22 2008
2.		NEW HAMPSHIRE DEPARTMENT OF STATE
3.		DEPARTMENT

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

My income does not qualify

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

Г	2. Health Care 🖵 3. In	isurance		4. Real Estate, including brokers, agent, developers, and landlords		Г	5. Banking or financial services		6. State of New Hampshire, county, or municipal employment	
Г	7. N.H. Retirement System		rrent use ment pro	. /	9. Restaura lodging	nts/	П .	10. Sale and distributi beverages	on of alcholic	☐ 11. Practice of law
Γ	12. Any business regulated Utilities Commission	by the Publi	c	13. Hors of gambli	e or dog racing, o ing	r other leg	al forms	14. Education	15. Water R	esources
Г	16. Agriculture	17. N.H. taxes:			Business Interprise Tax	<ul> <li>Interes</li> <li>Divider</li> </ul>		18. Optional: Si special interes	1	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.

Claire D. Clarke Signature of Reporting Individual

- 18-08

Date

Print Form