

2009 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name Diannel Rappa Work Address (Home) 258 Porter Rd Bath, NH
 e-mail *optional drappa@valley.net Home Work Phone 747-3508
 Primary Occupation YMCA/NHANPERD Ex. Dir.

The office, position, appointment, or employment with state government held by you. NO ACRONYMS
(Treasurer) Governor's Council on Physical Activity & Health (Reappointment)

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]

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SEP 17 2009

- Employee as Executive Director:
- NHANPERD - \$17,000
 - North Country Ymca, Inc. - \$25,000

NEW HAMPSHIRE SECRETARY OF STATE

If you have no qualifying 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 your or a family member than it would be on the general public.

<input type="checkbox"/> 1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business. <u>My husband Thomas A. Rappa is a District Ct. Judge full time in Plymouth.</u>			
<input type="checkbox"/> 2. Health Care	<input type="checkbox"/> 3. Insurance	<input type="checkbox"/> 4. Real Estate, including brokers, agents, developers, and landlords	<input type="checkbox"/> 5. Banking or financial services
<input type="checkbox"/> 6. State of New Hampshire, county, or municipal employment	<input type="checkbox"/> 7. N.H. Retirement System - <u>Thomas A. Rappa</u>	<input type="checkbox"/> 8. Current use land assessment program	<input type="checkbox"/> 9. Restaurants/ Lodging
<input type="checkbox"/> 10. Sale and distribution of alcoholic beverages	<input type="checkbox"/> 11. Practice of Law	<input type="checkbox"/> 12. Any business regulated by the Public Utilities Commission	
<input type="checkbox"/> 13. Horse or dog racing, or other legal forms of gambling	<input type="checkbox"/> 14. Education	<input type="checkbox"/> 15. Water Resources	<input type="checkbox"/> 16. Agriculture
17. N.H. taxes: <input type="checkbox"/> Business Profits Tax <input type="checkbox"/> Business Enterprise Tax <input type="checkbox"/> Interest and Dividends Tax	<input type="checkbox"/> 18. Optional: Specify any other area in which you have a special interest --		

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.

Date: 9/14/09 Signature of Reporting Individual: Diannel Rappa