

Type or Print Clearly

Full Name Constance Connie Soucy Work Address 7 Colby Ct Suite 191 / 492 Coolidge Ave

Primary Occupation Real Estate e-mail\* optional csoucy@system.com Work Phone 603-955-99

Name of office, appointment, or employment with government 25SPS

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. Norman Soucy - 492 Coolidge Ave - Littleton 25SPS

2. \_\_\_\_\_

3. \_\_\_\_\_

RECEIVED  
JAN 06 2009  
NEW HAMPSHIRE  
DEPARTMENT OF STATE

If you have no qualifying income indicate by writing your initials next to the following statement. My income does not qualify

1. Any profession, occupation, or business licensed or certified by the State of New Hampshire. List each such profession, occupation, or category of business

Real Estate

<input type="checkbox"/> 2. Health Care	<input type="checkbox"/> 3. Insurance	<input checked="" type="checkbox"/> 4. Real Estate, including brokers, agent, 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. NH Retirement System	<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"/> 18. Optional: Specify any other area in which you have a special interest
<input type="checkbox"/> 16. Agriculture	<input type="checkbox"/> 17. NH Taxes:	<input type="checkbox"/> Business Profits Tax	<input type="checkbox"/> Business Enterprise Tax	<input type="checkbox"/> Interest and Dividends Tax

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.

Connie Soucy Signature of Reporting Individual  
01/05/09 Date