

NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name Henry B. Stebbins

Work Address

66 Hancock St. Manchester, NH

Primary Occupation

RIH

e-mail optional

Work Phone

603-627-3700

Name(s) of office, appointment, or employment with government

Trustee; University System of New Hampshire,

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 received during the preceding calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included.

RECEIVED

JAN 16 2009

NEW HAMPSHIRE DEPARTMENT OF STATE

- Self - Stebbins Kozak & Donner Bellow PA
- wife - Fidelity Investments
-

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

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.

<u>PH - 11</u>										
<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.									
<input type="checkbox"/>	2. Health Care	<input type="checkbox"/>	3. Insurance	<input 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 checked="" 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	<input type="checkbox"/>	17. NH Business Profits Tax	<input type="checkbox"/>	18. Optional: Specify any other area in which you have a special interest	<input type="checkbox"/>	19. Business Enterprise Tax	<input type="checkbox"/>	20. 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:7 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. It shall be an absolute defense in any prosecution under this chapter that the person acted in reliance upon an advisory opinion on the subject issued under RSA 14-B:3, 14-C or RSA 21-G:30, 14-C.

Print Form

Signature of Reporting Individual [Signature]

Date 1/15/09