

NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name THOMAS W. CALLAHAN Work Address 33 S. COMMERCIAL ST. MANCHESTER NH 03101

Primary Occupation HEALTHCARE MGMT e-mail *optional TWCALLAHAN@ADELPHI.NET Work Phone 791 0312 x 105

Name of office, appointment, or employment with government ADVISORY COUNCIL ON WORKERS' COMPENSATION

RECEIVED

SEP 15 2006

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.

NEW HAMPSHIRE SECRETARY OF STATE

1. Beethford OCCUPATIONAL AND NURSE CARE, 10 WASHINGTON PI. Beethford NH 03110 (4) ORCHARD MEDICAL MGMT. 11 WASHINGTON PI. Beethford NH 03110
 2. Apple Therapy Services 166 RIVER RD Beethford NH 03110 (5) Apple NASHUA RIVERSIDE MEDICAL CTR. NASHUA NH
 3. Patriot Healthcare 33 S. COMMERCIAL ST. MANCHESTER NH 03101 (6) PHYSICIAN DIAGNOSTIC SERVICES 11 WASHINGTON PI. Beethford NH 03110
(7) BEETHFORD OCCUPATIONAL HEALTH, 21 O'BRIEN DRIVE S. BEETHFORD NH 03110
- 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 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

Patriot Healthcare inc

<input checked="" type="checkbox"/> 2. Health Care	<input checked="" 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 checked="" type="checkbox"/> 7. N.H. Retirement System	<input type="checkbox"/> 8. Current use land assessment program	<input type="checkbox"/> 9. Restaurants/ lodging	<input type="checkbox"/> 10. Sale/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	<input type="checkbox"/> 17. N.H. taxes	<input checked="" type="checkbox"/> Business Profits Tax	<input checked="" 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.

[Signature] Signature of Reporting Individual 9/8/06 Date