

NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name Peter R Goyette Jr Work Address Pete's Gun + Tackle
2 DRACUT RD

Primary Occupation SPORTING GOODS e-mail *optional _____ Work Phone 603 889 0684

Name 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. None **RECEIVED**
 2. None JUN 16 2006
 3. _____ **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 you or a family member than it would 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				
<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO
<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> NO
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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.

Peter R Goyette Jr 6/13/06
 Signature of Reporting Individual Date