

NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name MICHAEL K WATERS Work Address _____

Primary Occupation RETIRED e-mail *optional US1463677@AOL.COM Work Phone 603-457-2216

Name of office, appointment, or employment with government NONE

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. LAWRENCE RETIREMENT BOARD 354 ASPENWAY ST LAWRENCE MA 01843
2. _____
3. _____

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

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 <u>NONE</u>						RECEIVED JUN 14 2006 NEW HAMPSHIRE SECRETARY OF STATE	
<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. 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. 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.

Michael Waters 6-12-06
 Signature of Reporting Individual Date