

08/31/10 10:07 AM

2010 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly

Full Name THOMAS C MORONEY Work Address P.O. Box 1391 Concord, NH 03302-1391

Primary Occupation REHAB CONSULTANT e-mail*optional Work Phone 736-8534

The office, position, appointment, or employment with state government held by you. NO ACRONYMS CONTRACTOR - VOCATIONAL EXPERT NH STATE MEDICAL DISABILITY DETERMINATIONS UNIT -

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. (Use additional sheets as necessary.)

- 1.
2.

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

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:
2. Health Care
3. Insurance
4. Real Estate, including brokers, agent, developers, and landlords
5. Banking or financial services
6. State of New Hampshire, county, or municipal employment
7. N.H. Retirement System
8. Current use land assessment program
9. Restaurants/ lodging
10. Sale and distribution of alcoholic beverages
11. Practice of law
12. Any business regulated by the Public Utilities Commission
13. Horse or dog racing, or other legal forms of gambling
14. Education
15. Water Resources
16. Agriculture
17. N.H. taxes: Business Profits Tax, Business Enterprise Tax, Interest and Dividends Tax
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. 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.

Date 8-26-10 Signature of Reporting Individual Thomas C Moroney

Return to: Office of Secretary of State, 107 North Main Street, State House Room 204, Concord, NH 03301

RECEIVED

SEP 02 2010

NEW HAMPSHIRE DEPARTMENT OF STATE

Memorandum

To: Secretary of State

From: Department of Labor

Re: Statement of Financial Interests

Date: September 1, 2010

In accordance with RSA 15-A:4, please find completed Statement of Financial Interest form from Thomas C. Moroney who is an appointed member of the Vocational Rehabilitation Provider Advisory Board.