2020 NEW HAMPSHIRE STATEMENT OF FINANCIAL INTERESTS - RSA 15-A

Type or Print Clearly	
Full Name Jeffrey Alan Meyers	Work Address Guidehouse, 125 High St. Suite 401, Boston, MA 02110
Primary Occupation Consultant	e-mail jameyers55@comcast.net Work Phone 603-892-5786
Name the office, position, board or commission, board of directors, etc. or employment with state or county government held by you. NO ACRONYMS	Governor's Office of Emergency Relief and Recovery Stakholder Advisory Committee
A. List below the name, address, and type of any profession, business, or other organization in which yo proprietor, or employee, or served in any other professional or advisory capacity, and from which any calendar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be in	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, sprietor, 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 endar year. Sources of retirement benefits other than federal retirement and/or disability benefits shall be included. (Use additional sheets as necessary.)
1. State of NH, Department of Health and Human Services, 129 Pleasant St., Concord, NH 03301	rvices, 129 Pleasant St., Concord, NH 03301
2. State of New Hampshire, NH Superior Court, Concord, NH (spouse)	cord, NH (spouse)
If you have no qualifying income indicate by writing your initials next to the following statement.	nitials 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, reportable special interest in an item on this list if a change in law, a change in administrative rule, a decisior discipline a licensee or permittee, or other decision by government affecting the listed business, profession, financial effect on you or a family member than it would on the general public:	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. profession, occupation, or category of business:	ed or certified by the State of New Hampshire. List each such Legal
3. Insurance	4. Real Estate, including brokers, 5. Banking or financial 6. State of New Hampshire, county, or agent, developers, and landlords services
System 8. Current use land assessment program	☐ 9. Restaurants/☐ 10. Sale and distribution of alcoholic ☐ 11. Practice of beverages
Utilities Commission o	ng, or other legal forms 14. Education 15. Water Resource
16. Agriculture taxes: Profits Tax	Business Interest and Enterprise Tax Dividends Tax 18. Optional: Specify any other area in which you have a special interest
have read RSA 15-A and hereby swear or affirm that the fore person who knowingly fails to comply with the provisions of	the best of my knowness
Date May 11, 2020	Tuny a. Mujus.
	(Signature of Reporting Individual