BetsyAnn Wrask, Clerk Nigel Hicks-Tibbles, First Assistant Clerk Alona Tate, Second Assistant Clerk Theresa Utton-Jerman, Journal Clerk Chris Ditmeyer, Clerk Associate



House of Representatives State House Montpelier, VT 05633-5501 Tel: (802) 828-2247 House Staff@leg.state.vt.us

## **VERMONT HOUSE OF REPRESENTATIVES**

OFFICE OF THE CLERK OF THE HOUSE

House of Representatives Disclosure Form House Rule 90(b)(1)(C)

Name: Diane hanpher	_ ′	a' . Dimandi di .	
I serve on, or am a member of, the following board are regulated by law or that receive funding from the	*	sions, or similar ent	ities that
	Remuneration		
Board, Commission, or Similar Entity Name and Position (e.g. Member or Chair)	No	Yes Only Expenses e.g. mileage	Yes
Tri. Valley AROC (Addison Regional Operation Contrite	( X		
SIB (State Infrastructury Bank)		×	
My Employer: VT State Representive (Salary disclosure not required)	_/Subs (Addi	itute ANWS son Northwest	D School Dis
Signed this 4th day of January, 2023			
Viane hanpher Printed Name (please sign on back)	_		