# *STATE OF NEW HAMPSHIRE*

**Lobbyists Report of**
**Political Contributions**
**Addendum C**
**(RSA Chapter 15:6)**

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DEPARTMENT OF STATE

PLEASE PRINT

**I. Name of Lobbyist(s)** Stephanye Schuyler

**II. Name of lobbyist's partnership, firm or corporation, if any:**
Unitil Corporation
(Name of partnership, firm or corporation)

**III. Name of Client** _____ Date _____

**Political Contributions**
For each political contribution that is reportable pursuant to RSA Chapter 664 paid on behalf of the client/lobbyist and lobbying firm, indicate the following:

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Full name of candidate: n/a
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ _____ Office Candidate is Seeking _____

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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Full name of candidate: n/a
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ _____ Office Candidate is Seeking _____

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

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Full name of candidate: n/a
(Last Name) (First Name) (Middle Name/Initial)

Amount of contribution $ _____ Office Candidate is Seeking _____

(turn over to continue →)

If the contribution is an in-kind contribution, provide a description of the goods or services provided, and enter the actual cost of the in-kind contribution on the line above for amount of contribution. If the actual cost is not known, enter an estimated value and the word "estimate."

(If more than three contributions were made, report additional contributions on separate addendum C forms.)

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

October 28, 2015
(Date)

Stephanye Schuyler
(Print Name of lobbyist)

# *State of New Hampshire*

*Signature Form for Associated Lobbyist*
*RSA Chapter 15*

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Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

**Sworn Statement/Affirmation by Lobbyist**
**Statement of Income and Expenses for:**

Name of Lobbying partnership, firm, or corporation: Unitil Corporation

Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular client): _____

***Date of Report (check one):***

April 29, 2015 ☐ July 29, 2015 ☐ October 28, 2015 X January 27, 2016 ☐

I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):

x Addendum A(s).

____ Addendum B(s).

x Addendum C(s).

I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.

Stephanye Schuyler
(Signature of lobbyist)

October 28, 2015
(Date)

Stephanye Schuyler
(Print Name of lobbyist)