



STATE OF NEW HAMPSHIRE
2018 Statement of Income and Expenses
for LOBBYISTS
(RSA Chapter 15)

RECEIVED
 JUL 24 2018
 NEW HAMPSHIRE
 DEPARTMENT OF STATE

PLEASE PRINT

I. Name of Lobbyist(s) Mark A. Lambert, Carleton Simpson

II. Name of lobbyist's partnership, firm or corporation, if any:

Unitil Corporation
 (Name of partnership, firm or corporation)

6 Liberty Lane West Hampton NH 03842
 Business Address: (Street) (Town/City) (State) (Zip Code)

(603) 379-3848 (Telephone) () (Fax) e-mail Simpson@Unitil.com
Lambert@Unitil.com

III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

All reportable transactions occurring in the months prior to the reporting date relative to the following client:
Unitil Corporation
 (Full Name of Client as it appears on the Lobbyist Registration Form)

OR

All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

IV. Date of Report April 25, 2018 July 25, 2018
 Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18
 October 31, 2018 January 30, 2019
 activity from 7/1/18 to 9/30/18 activity from 10/1/18 to 12/31/18

V. There have been no fees received and no reportable transactions made since the last report.
 If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.

VI. Check if additional reports are attached:
 If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
 If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement
 If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions

Sworn Statement/Affirmation by Lobbyist
 I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

Carleton B. Simpson [Signature] 07/23/2018
 (Signature of lobbyist) (Date)

Carleton B. Simpson, MARK LAMBERT
 (Print Name of lobbyist)

d) Total expenses for this reporting period
(Add lines a, b and c)

d) \$ 12,480

e) Total of expenses paid this calendar year, prior to this reporting period
(This should be the amount on line f of addendum A for last month's report)

e) \$ 12,480

f) Total of all expenses year to date

f) \$ 24,960

VI. Other Expenses:

Provide the following detail for all expenditures of more than \$25 made from lobbying fees during this reporting period, including by whom paid or to whom charged.

Paid to:

Amount:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____

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.

Carlton B. Simpson
(Signature of lobbyist)

07/23/2018
(Date)

Carlton B. Simpson, MARK LAMBERT
(Print Name of lobbyist)



STATE OF NEW HAMPSHIRE

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

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I. Name of Lobbyist(s) Mark A. Lambert, Carleton Simpson

II. Name of lobbyist's partnership, firm or corporation, if any: Unital Corporation

III. Name of Client Unital Corporation Date 07/23/2018

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:

Full name of candidate: Bradley Jeb (Joseph) E. Amount of contribution \$ 100.00 Office Candidate is Seeking State Senate

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."

Blank lines for in-kind contribution details

Full name of candidate: Watters David Amount of contribution \$ 100.00 Office Candidate is Seeking State Senate

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."

Blank lines for in-kind contribution details

Full name of candidate: 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.

Carleton B. Simpson, [Signature]
(Signature of lobbyist)

07/23/2010
(Date)

Carleton B. Simpson, MARK LAMBERT
(Print Name of lobbyist)