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	Individual				
Prefix Mr. First Peter A.	Last	Carroli			
2. Address	an previously reporte	d			
Address1 28691 Hope Circle		Address2			
City Easton	State	MD	Zip Code	21601	- (
3. Principal place of business (if different th	an line 2)				
City	State		Zip Code		- (
4a. Contact Name	b. Telephone Number				5.
Mr. Peter A. Carroll	(410) 822-4830	pcarroll@go	easton.net		
7. Client Name					6.
Caterphia 14C			<del></del>		3
				11. N	o Lobbying A
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			neral issue areas in which the registra
engaged in lobbying information as reque	on behalf of the client during the rested. Attach additional page(s) as n	eporting period. Using eeded.	a separate page for each code, provide
15. General issue an	ea code ENG Energy/No	uclear	(one per page)
16. Specific lobbying	g issues		
Gas Engine Program	s and Distributed Energy Systems		
	gress and Federal agencies	Check if None	✓ House ✓ Senate
Department of Energ Energy and Water Su EPA	y lb Committees		
8. Name of each ind	ividual who acted as a lobbyist in the		Covered Official Position (if applicabl
irst	Last	Suffix	overed Official Position (it applicable
Peter A.	Carroli		
9. Interest of each fe	oreign entity in the specific issues	listed on line 16 above	☑ Check if None
			-

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