

Pennsylvania Natural Gas Supplier Annual Report Form -- Pursuant to 52 Pa. Code Section 62.110

Company Name: Utility Code:
Contact Person: Direct Phone:
Company Address:
City, State, Zip:
Company Email:
Calendar Year:

Complete one Annual Natural Gas Supplier Report for each License/Certificate issued by the Commission.

This form may be photocopied for reporting purposes. Please mark with a "✓" the category that applies:

- Takes title to the Natural Gas (Supplier or Aggregator)
- Does not take title to the Natural Gas (Broker/Marketer)

If "Takes title to the Natural Gas (Supplier or Aggregator)" is checked, please complete the two boxes below

If "Does not take title to the Natural Gas (Broker/Marketer)" is checked, please input "0" in both boxes below

Total revenue from the sales of natural gas supply services for the year:

Total amount (volume) of natural gas sold during the year: MMBtu

In the box below, provide the names and addresses of nontraditional marketers and nonselling marketers who are currently or will be acting as agents for your company in the upcoming year.

Please print name here and sign below: Whitney Fawcett

I *Whitney Fawcett* hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information, and belief) and that I expect to be able to prove the same at a hearing held in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa. C.S. sec. 4904 (relating to unsworn falsification to authorities).