



COMMONWEALTH OF PENNSYLVANIA
PENNSYLVANIA PUBLIC UTILITY COMMISSION
COMMONWEALTH KEYSTONE BUILDING
400 NORTH STREET
HARRISBURG, PENNSYLVANIA 17120
February 3, 2025

Docket No. A-2024-3051102
Utility Code: 1127412

CERTIFIED

JENNIFER GIBBS MANAGING MEMBER
SMARTSWITCH ENERGY LLC
12400 CHERRY LAUREL TERRACE
AUSTIN TX 78738

RE: Electric Generation Supplier License Application: Data Request Set 2 Responses

Dear Ms. Gibbs:

On September 10, 2024, the Pennsylvania Public Utility Commission (Commission) received SmartSwitch Energy LLC's Application for an Electric Generation Supplier (EGS) license. On September 20, 2024, the Commission served a Deficiency Secretarial Letter requesting missing or incomplete information. On September 25, 2024, SmartSwitch Energy LLC filed responses to the Deficiency Secretarial Letter. On October 16, 2024, the Commission served a Data Requests Secretarial Letter requesting missing information. On October 31, 2024, SmartSwitch Energy LLC filed responses to the Data Requests Secretarial Letter. On November 25, 2024, the Commission served Data Requests Set 2 Secretarial Letter requesting missing information. On January 31, 2025, SmartSwitch Energy filed responses to the Data Requests Set 2 Secretarial Letter. In order for us to complete our analysis of SmartSwitch Energy LLC's EGS Application, the Commission's Energy Industry Group requires answers to the attached questions.

Please use the Commission's efilng system or an overnight delivery service to submit the requested information to the Secretary of the Commission **within 30 days** from the date of this letter. The Commission accepts all public documents through our efilng system and strongly recommends companies open an efilng account through the Commission's website at <https://efiling.puc.pa.gov>. Use of the efilng system will ensure that submissions by the company are received timely and receipt can be verified. Failure to respond timely may result in the Application being denied.

If your filing contains confidential material, you are required to either file by overnight delivery or submit to the Secretary's Share Point File system to ensure the timely filing of your submission. Filers should contact the Secretary's Bureau in advance to gain access to the Share Point File system. Make sure to reference the Docket Number listed above and mark the materials "CONFIDENTIAL" in bold or highlighted manner if any of the requested information is deemed to be of a confidential nature.

The overnight address for hard-copy or confidential responses is:

Rosemary Chiavetta, Secretary
Pennsylvania Public Utility Commission
400 North Street, 2nd Floor
Harrisburg, PA 17120

Your answers should be verified per 52 Pa Code § 1.36. Accordingly, you must provide the following statement with your responses:

I, Jennifer Gibbs, hereby state that the facts above set forth 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. § 4904 (relating to unsworn falsification to authorities).

Signature

Title

Date

J Gibbs
Managing Member
2-5-2025

Please note that all documents requiring notary stamps must have original signatures.

If SmartSwitch Energy LLC has decided to withdraw its Application, please reply notifying the Commission of such a decision.

Finally, in order to expedite the Application review process, please send a copy of your response to Stephen Jakab at sjakab@pa.gov. If any problems arise that prevent a full timely response or if any clarification of these data requests is needed, please contact Stephen Jakab of the Bureau of Technical Utility Services via e-mail at sjakab@pa.gov.

Sincerely,

Rosemary Chiavetta
Rosemary Chiavetta
Secretary

Enclosure

Docket No. A-2024-3051102
SmartSwitch Energy LLC
Data Request Set 3

1. Reference Application, Section 7.b, Financial Fitness – Please provide at least three recent consecutive months of bank statements (November, December, and January) from the applicant's parent and managing member, Jennifer Gibbs.
2. Reference Application, Section 12, Notarized Proofs – Please provide the applicant's seven notarized proofs of publications for the entire commonwealth of Pennsylvania.

Notarized proofs will be submitted upon receipt from the publications

RETURN SERVICE REQUESTED

JENNIFER GIBBS
12400 CHERRY LAUREL TER
AUSTIN TX 78738-6060

Managing Your Accounts

Branch Name	Private Wealth Advisors
 Phone Number	(877) TEX-BANK (839.2265)
 Mailing Address	2000 McKinney Ave Ste 1800 Dallas, Texas 75201
 Online Access	www.texascapitalbank.com

**WE BUILD RELATIONSHIPS,
NOT JUST OUR CLIENTS' WEALTH.**

We serve families across generations, helping to preserve family legacies.



Summary of Accounts

Account Type	Account Number	Ending Balance
STAR HIGH-YIELD SAVINGS	[REDACTED]	\$247,937.77

STAR HIGH-YIELD SAVINGS - [REDACTED]

Account Summary

Date	Description	Amount
10/01/2024	Beginning Balance	\$274,800.30
	3 Credit(s) This Period	\$3,137.47
	3 Debit(s) This Period	\$30,000.00
12/31/2024	Ending Balance	\$247,937.77

Interest Summary

Description	Amount
Interest Earned From 10/01/2024 Through 12/31/2024	
Annual Percentage Yield Earned	4.78%
Interest Days	92
Interest Earned	\$3,137.47
Interest Paid This Period	\$3,137.47
Interest Paid Year-to-Date	\$12,937.77

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS, WRITE US AT THE ADDRESS ON THE FRONT OF THIS STATEMENT OR CALL US AT THE TELEPHONE NUMBER ON THE FRONT OF THIS STATEMENT.

Contact us as soon as you can if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we send you the FIRST statement on which the error or problem appeared.

- (1) Tell us your name and account number.
- (2) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information.
- (3) Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will re-credit your account for the amount you think is in error, so you will have use of the money during the time it takes us to complete our investigation.

	CHECKS OUTSTANDING		
THIS IS PROVIDED TO HELP YOU BALANCE YOUR STATEMENT:	NO.	AMOUNT	THIS IS PROVIDED TO HELP YOU BALANCE YOUR CHECKBOOK:
BANK BALANCE SHOWN ON THIS STATEMENT: \$ _____			CHECKBOOK BALANCE AT STATEMENT DATE: \$ _____
ADD + (IF ANY) DEPOSITS NOT SHOWN ON THIS STATEMENT: \$ _____			SUBTRACT - (IF ANY) ACTIVITY CHARGE: \$ _____
TOTAL: \$ _____			SUB-TOTAL: \$ _____
SUBTRACT - (IF ANY) CHECKS OUTSTANDING: \$ _____			SUBTRACT - (IF ANY) OTHER BANK CHARGES: \$ _____
BALANCE: \$ _____	TOTAL		BALANCE: \$ _____
SHOULD AGREE WITH YOUR CHECKBOOK BALANCE	←————→		SHOULD AGREE WITH YOUR STATEMENT BALANCE

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR STATEMENT

If you think your statement is wrong, or if you need more information about a transaction on your statement, write us (on a separate sheet) at the address shown on your statement as soon as possible. We must hear from you no later than 60 days after we sent you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- (1) Your name and account number.
- (2) The dollar amount of the suspected error.
- (3) Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are investigating, but you are still obligated to pay the parts of your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount you question.

TERMS GOVERNING ACCOUNTS

Deposit in or presentment to the Bank of any item for a customer account shall constitute the customer's consent to the terms hereof with respect to the account and all items deposited therein or presented to the Bank for payment.

All deposits and collections shall be governed by the pertinent provisions of the Uniform Commercial Code-Bank Deposits & Collection (of Texas), as from time to time amended or as varied by the agreements permitted by that statute, including those hereinafter set out.

Receipt from others or items for credit to a customer's account shall render the customer liable to the Bank to the same extent as though they had been endorsed by and received directly from the customer. No money or item shall be deemed to have been received by the Bank unless and until it shall have issued a receipt therefor.

The account shall at all times be subject to service charges according to the practice of the Bank prevailing at the time. When the Bank deems such action proper, the Bank may require that the account be closed. The provisions hereof shall control, in the event of conflict with any deposit slip or passbook.

The Bank reserves the right to change the provisions hereof by printing this statement Terms Governing Accounts, incorporating the change. The new Terms Governing Accounts will be effective, prospectively, when the statement containing the change is made available to the customer, by mailing or otherwise.

Please examine this statement and enclosed items at once. Report the loss or theft of any checks issued for this account immediately. If no error is reported within 30 days, this statement will be considered correct. All items credited subject to final payment.



Texas Capital Bank

Private Wealth Advisors

2350 Lakeside Blvd., Suite 800
Richardson, TX 75082

Statement Ending 12/31/2024

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STAR HIGH-YIELD SAVINGS - [REDACTED] (continued)

Account Activity

Post Date	Description	Debits	Credits	Balance
10/01/2024	Beginning Balance			\$274,800.30
10/31/2024	INTEREST PAYMENT		\$1,130.34	\$275,930.64
11/15/2024	XFR XFER TO DDA 001511014704 111524 G ID:6324909 RF#131531011949	\$10,000.00		\$265,930.64
11/29/2024	INTEREST PAYMENT		\$1,043.67	\$266,974.31
12/02/2024	XFR XFER TO DDA 001511014704 120224 G ID:6374886 RF#170110005674	\$10,000.00		\$256,974.31
12/11/2024	XFR XFER TO DDA 001511014704 121124 G ID:6407889 RF#170136008946	\$10,000.00		\$246,974.31
12/31/2024	INTEREST PAYMENT		\$963.46	\$247,937.77
12/31/2024	Ending Balance			\$247,937.77

Daily Balances

Date	Amount	Date	Amount	Date	Amount
09/30/2024	\$274,800.30	11/29/2024	\$266,974.31	12/31/2024	\$247,937.77
10/31/2024	\$275,930.64	12/02/2024	\$256,974.31		
11/15/2024	\$265,930.64	12/11/2024	\$246,974.31		



Texas Capital Bank

Private Wealth Advisors

2350 Lakeside Blvd., Suite 800
Richardson, TX 75082

Statement Ending 12/31/2024

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High Yield Savings Account XXXXXX

Last Updated: February 5, 2025 2:08 PM

4.50% | **\$238,854.76** | **\$238,854.76**
 APY Available Balance Current Balance

[Account and Routing Numbers](#)

[Transactions](#) [Details & Settings](#)

Date	Description	Amount	
JAN 31 2025	INTEREST PAYMENT	\$916.99	⋮
		\$238,854.76	
JAN 22 2025	XFR XFER TO DDA 001511014704012225 G ID:6543394RF#183027006945	(\$10,000.00)	⋮
		\$237,937.77	
DEC 31 2024	INTEREST PAYMENT	\$963.46	⋮
		\$247,937.77	
DEC 11 2024	XFR XFER TO DDA 001511014704121124 G ID:6407889RF#170136008946	(\$10,000.00)	⋮
		\$246,974.31	
DEC 2 2024	Texas Capital Bank Transfer120224 G ID:6374886RF#170110005674	(\$10,000.00)	⋮
		\$256,974.31	
NOV 29 2024	INTEREST PAYMENT	\$1,043.67	⋮
		\$266,974.31	
NOV 15 2024	XFR XFER TO DDA 001511014704111524 G ID:6324909RF#131531011949	(\$10,000.00)	⋮
		\$265,930.64	
OCT 31 2024	INTEREST PAYMENT	\$1,130.34	⋮
		\$275,930.64	
SEP 30 2024	INTEREST PAYMENT	\$1,163.66	⋮
		\$274,800.30	