Pennsylvania Public Utility Commission Bureau of Administration PO Box 3265 Harrisburg, PA 17105-3265

For questions call: 717-783-6806 e-mail Reports to: RA-Act13-Fiscal@pa.gov

UNCONVENTIONAL GAS WELL FUND USAGE REPORT

Calendar Year Reporting:	SAP Vendor No.:	100X	
County: Tioga Name of Municipality: NEISON TOWNShip			
County / Municipal Website:			
Contact Name: <u>Javid Fritz</u> Title: <u>Charman</u>			
ddress: PC BOX 119 Email Address: <u>nelsontpeepix.ne</u>			
ress 2: Telephone No.: 57(1-827-7892ext:			
city: <u>Nelson</u>	State: PA Zip Code: 11940		
TOTAL AMOUNT OF FUNDS RECEIVED: \$37,172.98			
USE OF UNCONVENTIONAL GAS WELL FUNDS		AMOUNT	
Construction, reconstruction, maintenance and repair of public infrastructure.	roadways, bridges and 第	36,193. –	
2. Water, storm water and sewer systems, including constr maintenance and repair	uction, reconstruction,		
3. Emergency preparedness and public safety, including law services, hazardous material response, 911, equipment a services			
4. Environmental programs, including trails, parks and recreation, open space, flood plain management, conservation districts and agricultural preservation			
5. Preservation and reclamation of surface and subsurface supplies	waters and water		
6. Tax reductions, including homestead exclusions			
7. Projects to increase the availability of safe and affordable	e housing to residents		
8. Records management, geographic information systems a technology	nd information		
9. The delivery of social services			
10. Judicial services			
11. Deposit into the municipality's capital reserve fund if the a purpose set forth in Act 13 of 2012	funds are used solely for	479.98	
12. Career and technical centers for training of workers in the	e oil and gas industry		
13. Local or regional planning initiatives under the act of July 247), known as the Pennsylvania Municipalities Planning	31, 1968 (P.L. 805, No. Code		
14. TOTAL FUND USAGE (This amount must equal the amou Amount of Funds Received" space above)	nt entered in the "Total $$	37.172.98	

Calendar Year Reporting: _	2013 Name of Municipal	SAP Vendor No ity: <u>NEKON T</u>		
VERIFICATION STATEMENT				
I, the undersigned, 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, if one is deemed necessary by the Public Utility Commission, 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).				
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Signature of Individual or Officer			Date	
Name of person to be contacted the Phone Number:	or additional information:	avid Fritz-		