

Calendar Year Reporting: 2021

SAP Vendor No.: 141742

County: Tioga

Name of Municipality: County of Tioga

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).

Janice Chamberlain
Signature of Individual or Officer

3-20-2023
Date

Name of person to be contacted for additional information: Janice Chamberlain

Phone Number: 570-723-8209

Email: jchamberlain@tiogacountypa.us