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:2014	SAP Vendor No.: <u>159151</u>	
County: Jefferson Name of Municipality: McCalmont Twp		
County / Municipal Website: www.jeffersoncountypa.com		
Contact Name: Michelle Peace	Title: Secretary	
Address: 127 Firehouse Lane	Email Address: mccal3@verizon.net	
Address 2: PO Box 276	Telephone No.: 814-93-9711 ext:	
City: Anlta	State: <u>PA</u> Zip Code: <u>15711</u>	
TOTAL AMOUNT OF FUNDS RECEIVED:	24595,22	
USE OF UNCONVENTIONAL GAS WELL FUNDS	AMOUNT	
Construction, reconstruction, maintenance and repair public infrastructure.	of roadways, bridges and 8986.40	
Water, storm water and sewer systems, including cons maintenance and repair	truction, reconstruction,	
3. Emergency preparedness and public safety, including laservices, hazardous material response, 911, equipmen services	aw enforcement and fire t acquisition and other	
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	e waters and water	
6. Tax reductions, including homestead exclusions		
7. Projects to increase the availability of safe and affordable housing to residents		
8. Records management, geographic information system technology	s and information	
9. The delivery of social services		
10. Judicial services		
11. Deposit into the municipality's capital reserve fund if a purpose set forth in Act 13 of 2012	the funds are used solely for 15608.82	
12. Career and technical centers for training of workers in	the oil and gas industry	
13. Local or regional planning initiatives under the act of J 247), known as the Pennsylvania Municipalities Planni	uly 31, 1968 (P.L. 805, No. ng Code	
14. TOTAL FUND USAGE (This amount must equal the am Amount of Funds Received" space above)	1	

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	VERIFICATION	STATEMENT	
I, the undersigned, hereby state to the best of my knowledge, in hearing, if one is deemed neces the statements herein are made falsification to authorities).	nformation and belief) ssary by the Public Util	and that I expect to be able lity Commission, in this ma	to prove the same at a tter. I understand that
Muhelle R f Signature of Individual or Officer	Reace		<u>3/2015</u> Date
Name of person to be contacted fo	or additional information:	Michelle Peace	
Phone Number: <u>814-938-971</u>	1	Email: <u>mccal3@verizo</u>	on.net