For questions call: 717-783-6806

e-mail Reports to: RA-Act13-Fiscal@pa.gov

UNCONVENTIONAL GAS WELL FUND USAGE REPORT

Calendar Year Reporting: <u>201</u> 6	SAP Vendor No.:	692265		
County: Butter Name of Municipality: Connoquenessing Tup.				
County / Municipal Website: Www. Connotup. com				
Contact Name: Lee Ann Kradel Title: Treasurer/Asst. Sec.				
Address: 102 Township Dr. Email Address: Connocuenessingtup@200minteme				
Address 2: Telephone No.: 724-486-3888xt:				
City: Renfrew	State: PA Zip Code: 16053			
TOTAL AMOUNT OF FUNDS RECEIVED: 155276,80				
USE OF UNCONVENTIONAL GAS WELL FUNDS	×.	AMOUNT	r'	
Construction, reconstruction, maintenance and repair of public infrastructure.	roadways, bridges and	46901.43		
2. Water, storm water and sewer systems, including construction, reconstruction, maintenance and repair				
3. Emergency preparedness and public safety, including law enforcement and fire services, hazardous material response, 911, equipment acquisition and other services				
4. Environmental programs, including trails, parks and recreplain management, conservation districts and agricultura				
5. Preservation and reclamation of surface and subsurface waters and water supplies				
6. Tax reductions, including homestead exclusions				
7. Projects to increase the availability of safe and affordable	housing to residents			
8. Records management, geographic information systems ar 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	108375,37		
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 July 3 247), known as the Pennsylvania Municipalities Planning C	The state of the s			
14. TOTAL FUND USAGE (This amount must equal the amoun Amount of Funds Received" space above)	t entered in the "Total	155276.80		

ng: 2016 SAP Vendor No.: 692265

Name of Municipality: Connoquenessing Township Calendar Year Reporting: 2016

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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Lelling Gradel	3-	1-18
Signature of Individual or Officer		Date
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Name of person to be contacted for additional information: Lel Ann Kradel

Phone Number: 724-486-3888 Email: Connocueressing two 200 minternet. net