FILE

11-03-GE-RPT

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PUCO

COMPETITIVE RETAIL ELECTRIC SERVICE

(check all that apply):

- O AGGREGATOR
- O ELECTRIC COOPERATIVE
- X GOVERNMENTAL AGGREGATOR
- O POWER MARKETER
- (SPECIFY)_____
- O RETAIL ELECTRIC GENERATION PROVIDER
- O ELECTRIC UTILITY
- O POWER BROKER
- O OTHER

INTRASTATE

ANNUAL REPORT

OF

Village of Lisbon

203 North Market Street
Lisbon, OH 44432

TO THE
PUBLIC UTILITIES COMMISSION OF OHIO

FOR THE
YEAR ENDED DECEMBER 31, 2010

BRENDA FARGO, GOVERNMENT AGGREGATION MANAGER,
341 WHITE POND DRIVE, AKRON OH 44320
(330)-315-6898

This is to certify that the images appearing are an accurate and complete reproduction of a case file document delivered in the regular course of business
Technician_____ Date Processed MAY 04 2011

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IDENTITY OF RESPONDENT

1. State whether respondent is a corporation, a joint stock association, a firm or partnership, or an individual.

   Respondent is a political subdivision in Ohio.

2. Identify names of affiliate and subsidiary companies of the respondent.

   N/A

3. Date when respondent began operations in Ohio.

   N/A

4. If a consolidated or merged company, give names of each such incident, date, and Commission authority. If a reorganized company, give name of original corporation.

   N/A

5. If incorporated specify (a) Date of filing articles of incorporation, (b) State in which incorporated,

   N/A

6. Ohio certificate number, case number granting authority and date issued.

   10-307E (1) issued November 29, 2010

7. State whether or not the respondent during the year conducted any part of its business under a name or names other than that shown on Title Page. If so, give full particulars.

   N/A

8. Description of Ohio service territory served by respondent.

   The Village of Lisbon is a Certified Governmental Aggregator. It provides an electric aggregation program to its residents.

IMPORTANT CHANGES DURING THE YEAR

Report important changes of the types listed. Except as otherwise indicated, data furnished should apply to the same period the report covers. Answers should be numbered in accordance with the inquiries and if "none" states the fact, it should be used. If information, which answers an inquiry, is given elsewhere in the report, identification of the other answer will be sufficient.

1. Changes in ownership or control (shareholders holding 5% or more of outstanding stock).

   N/A

2. Other important changes: Give brief particulars of each other important change, which is not disclosed elsewhere in this report.

   N/A

STATEMENT OF INTRASTATE
GROSS RECEIPTS AND KWH SALES

Customer Class	Receipts ($)	Sales (kWh)
Residential	0	0
Commercial	0	0
Industrial	0	0
Other	0	0
Total	0	0

City of Youngstown

Instructions:

This information is used for PUCO annual assessment purposes pursuant to Section 4905.10, Revised Code. The reporting company shall report its intrastate gross receipts and corresponding sales of kilowatt hours of electricity for the provision of retail services for which it is subject to certification by the PUCO under Section 4928, Revised Code. Sales of kilowatt-hours of electricity are deemed to occur at the meter of the retail customer.

The reporting company shall maintain supporting and/or subsidiary records to separately record receipts and sales of electricity derived from operations other than in Ohio. Information presented herein is subject to audit by the PUCO.

COMPANY CONTACTS

IN ORDER TO ENSURE THAT PUCO CORRESPONDENCE IS DIRECTED TO THE APPROPRIATE PERSON AT THE CORRECT ADDRESS, PLEASE COMPLETE THE FOLLOWING.

Name, Title, Address, and Phone Number of the Company's Contact Persons

To Receive Entries and Orders from the Docketing Division

Brenda Fargo — Gov't Aggregation Manager

Name — Title

341 White Pond Drive, Akron, OH 44320

Address

330-315-6898

Phone Number (Including Area Code)

fargob@fes.com

E-Mail Address

Name, Title, Address, and Phone Number of Person to whom Invoice Should be directed

N/A

Name — Title

Address

Phone Number (Including Area Code)

Name and Address of the President

N/A

Name — President

Address

VERIFICATION

The President or Chief Officer of the company must verify the foregoing report. The oath required may be taken before any person authorized to administer an oath by the laws of the State in which the same is taken.

OATH

State of Ohio

County of Mahoning

Brenda Fargo makes oath and says that
(Insert here the name of the affiant)

she is Aggregation Services Provider
(Insert here the official title of deponent)

of Village of Lisbon
(Insert here the exact legal title or name of the respondent)

that he has examined the foregoing report; that to the best of his knowledge, information, and belief, all statements of fact contained in the said report are true and the said report is a correct statement of the business and affairs of the above-named respondent in respect to each and every matter set forth therein during the period from and including January 1 , 2010, to and including December 31 , 2010.

Brenda Fargo
(Signature of affiant)