



# Public Utilities Commission

## Annual Report to the Commission for Competitive Retail Natural Gas Service Providers

- RETAIL NATURAL GAS SUPPLIER
- RETAIL NATURAL GAS MARKETER
- RETAIL NATURAL GAS BROKER
- RETAIL NATURAL GAS AGGEGATOR
- OTHER :

Certification No. 10-191G

### Annual Report for the Year ending December 31, 2012 of Glacial Natural Gas, Inc.

Address:

24 Route 6A  
Sandwich, MA 02563

Website URL:

[www.glacialenergy.com](http://www.glacialenergy.com)

Filed by:

**Adam Gusman**  
**(202) 421-4855**

Changes: This company did not have any changes in name(s), principal address, legal status, ownership, corporate structure or operations during the 2011 reporting year or thereafter.

Annual Report filings and instructions are available at:

[www.puco.ohio.gov/puco/docketing/](http://www.puco.ohio.gov/puco/docketing/)



Office of the  
Ohio Consumers' Counsel  
*Your Residential Utility Consumer Advocate*

August 5, 2013

**Action Required by  
August 29, 2013**

Glacial Natural Gas, Inc.  
Attn: Kate Prins  
5326 Yacht Haven Grande, Box 36  
St Thomas, VI 00802

OCC Record No. **692**

The Office of the Ohio Consumers' Counsel (OCC) hereby requests verification of your company's Ohio intrastate Gross Earnings (Revenues). The figure shown below was taken from your company's 2012 Annual Report to the Public Utilities Commission of Ohio (PUCO), and will be used to calculate your company's assessment for the FY 2014 operation of the OCC.

If the amount recorded by our office is accurate, please sign and date below. If the amount is inaccurate, please provide the correct figure and explain any variance in the intrastate gross revenues of your company. This verification must be returned to our office by **August 29, 2012** via mail or e-mail or fax. **Please choose only one method.** An invoice, based on the figure you provide, will be mailed to your company in mid to late September, with payment due 30 days later.

If you have any questions regarding this request, please contact me at (614) 466-9495.

Lindsey Lewis  
Operations Department  
lewis@occ.state.oh.us  
Fax: 614.466.9475

2012 Intrastate Gross  
Earnings (Revenue) Total

*Amended Amount*  
8,998,156<sup>00</sup>/<sub>100</sub>  
\$ ~~5,359,859.00~~

Verification Signature

*Pamela Scully*

Date

8/27/13

Schedule 1 is used for PUCO annual assessment purposes pursuant to Section 4905.10, Revised Code. The reporting company shall maintain supporting and/or subsidiary records to separately record revenues derived from total operations and from its Ohio intrastate operations. Information presented herein is subject to audit by the PUCO.

For the purpose of this report, sales of natural gas are deemed to occur at the meter of a retail customer.

**SCHEDULE: 1**

<b>STATEMENT OF INTRASTATE SALES AND REVENUES *</b>			
		Sales (Mcf)	Revenues (\$)
1	Choice Program Retail Sales	1,347,838	\$5,359,859
2	Choice Program Aggregation Sales	0	\$0
3	Total Natural Gas Sales (1 + 2 )	1,347,838	\$5,359,859

\* The information reported on this form should refer only to those sales and revenues for which certification pursuant to Section 4929.20, Revised Code, is required. Natural gas Standard Choice Offer (SCO) providers should include such sales and revenues as part of Choice Program Retail Sales.

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

**Docketing Contact Information**

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adam.gusman@glacialenergy.com

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Email

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Adam Gusman

Chief Compliance Officer

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Name

Title

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24 Route 6A Sandwich, MA 02563

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Address

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(508) 833-3500

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Phone Number (including Area Code)

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**Fiscal Contact Information**

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accounts.payable@glacialenergy.com

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Email

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Kate Prins

Accounts Payable Manager

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Name

Title

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5326 Yacht Haven Grande, Box 36 St Thomas, VI 00802

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Address

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(340) 715-7081

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Phone Number (including Area Code)



# Public Utilities Commission

## Affidavit for the Filing of the Annual Report of a Regulated Entity

### REQUIRED VERIFICATION:

The Annual Report of a Regulated Entity to the Commission must be verified by an authorized officer of the Reporting Entity, pursuant to Ohio Revised Code Section 4905.14(A)(1).

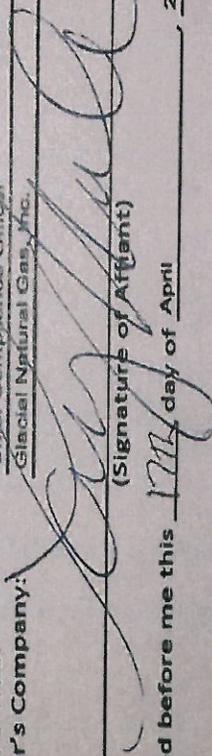
State of: U.S. Virgin Islands  
County of: St. Thomas-St. John

Affiant's Name: Gary D. Mole  
Affiant's Title: President  
Reporting Entity: Glacial Natural Gas, Inc.

OATH:  
The undersigned, being duly sworn, states that s/he is authorized to file the foregoing Annual Report to the Public Utilities Commission of Ohio on behalf of the above-named Reporting Entity; that to the best of her/his knowledge, information, and belief, all statements of fact contained therein, including any supporting schedules, are true; and that said Annual Report is a correct statement of the business and affairs of the Reporting Entity in respect to each and every matter set forth during the reporting period identified therein.

If applicable, the employee, agent, accounting firm or other third party company indicated below is hereby authorized to electronically file said Annual Report on my behalf.

Filer's Name: Adam Guerriero  
Filer's Title: Chief Compliance Officer  
Filer's Company: Glacial Natural Gas, Inc.

  
(Signature of Affiant)

Sworn and subscribed before me this 17<sup>th</sup> day of April, 2013

Signature of Notary

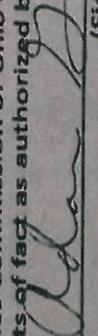
Print name of Notary: \_\_\_\_\_

My commission expires on: \_\_\_\_\_

**NOTARY PUBLIC**  
Name: Jade Pratt  
My Commission Exp: June 7, 2016  
NP Commission #: NP-07-12  
St. Thomas/St. John USVI-District

### DECLARATION OF FILER:

The above indicated Filer, if applicable, hereby verifies that the Annual Report being electronically filed with the Public Utilities Commission of Ohio on behalf of the above-named Reporting Entity accurately reflects all statements of fact as authorized by the above-named Affiant.

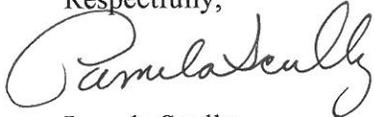
  
(Signature of Filer)

August 23, 2013

Public Utilities Commission of Ohio  
Business Resources, Financial & Services

Regarding the amendment Glacial Natural Gas, Inc. our Statement of Intrastate Gross Receipts the original figures we taken before we had completed our annual financial reports. The amended figure reflects our actual financial report.

Respectfully,

A handwritten signature in black ink that reads "Pamela Scully". The signature is written in a cursive, flowing style.

Pamela Scully  
Tax Manager  
340-227-2453

HP Officejet 4620 e-All-in-One

Fax Log for  
Gary Woodard  
2312767917  
Aug 27 2013 3:37PM

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Last Transaction

Date	Time	Type	Station ID	Duration	Pages	Result
				Digital Fax		
Aug 27	3:35PM	Fax Sent	16144669475	1:10 N/A	2	OK