



Certification Number: 89-9021

PUCOID Number: 358146

**Annual Report for the Year ending December 31, 2013  
of  
Spelman Pipeline Holdings LLC**

Address:

8500 Station St  
Mentor, OH 44060

Website URL:

N/A

Filed by:

**Joe Brem**  
**(440) 701-5100**

Changes: This company did not have any changes in name(s), principal address, legal status, ownership, corporate structure or operations during the 2013 reporting year.

Annual Report filings and instructions are available at:

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

## STATEMENT OF INTRASTATE-GROSS EARNINGS

				Amount
Line No.	Item	Total Company	Other Than Ohio Intrastate	Ohio Intrastate
1	Operating and Miscellaneous Revenue (Rent Revenue, Special Billings others, rent revenue-nonoperating, return on regulated investments used to provide nonregulated products and services, etc.)	\$48,775	\$0	\$48,775
2	Other Revenue, Dividend and Interest Income, Gains From Disposition of Property -Operating and Nonoperating, Other Operating or Nonoperating Gains ( foreign currency exchange or transfer, extinguishment of debt, company's share of earnings of affiliated company accounting for on equity method, income	\$0	\$0	\$0
3	<b>SUBTOTAL (1) + (2)</b>	\$48,775	\$0	\$48,775
4	Earning or receipts from sales to other public utilities for resale	\$0	\$0	\$0
5	<b>Total (3) + (4)</b>	\$48,775	\$0	\$48,775

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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Istevens@egas.net

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Email  
Laurie Stevens Controller

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Name Title

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8500 Station Street, Suite 100 Mentor, OH 44060

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Address

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(440) 974-3770

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Phone Number (including Area Code)

**Fiscal Contact Information**

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Istevens@egas.net

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Email  
Laurie Stevens Controller

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Name Title

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8500 Station Street, Suite 100 Mentor, OH 44060

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Address

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(440) 974-3770

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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: OHIO  
County of: LAKE

Affiant's Name: Don Whiteman  
Affiant's Title: Corporate Controlier  
Reporting Entity: Spelman Pipeline Holdings LLC

### 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: \_\_\_\_\_  
Filer's Title: \_\_\_\_\_  
Filer's Company: \_\_\_\_\_

Donald A. Whiteman  
(Signature of Affiant)

Sworn and subscribed before me this 30<sup>th</sup> day of May, 2014.

Megan Richards  
Signature of Notary  
Print name of Notary: Megan Richards  
My commission expires on: 7/18/15



MEGAN RICHARDS  
Notary Public  
In and for the State of Ohio  
My Commission Expires  
July 18, 2015

### 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)





