Ohio | Public Utilities Commission

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

- [ ] RETAIL NATURAL GAS SUPPLIER
- [ ] RETAIL NATURAL GAS MARKETER
- [x] RETAIL NATURAL GAS BROKER
- [ ] RETAIL NATURAL GAS AGGEGATOR
- [ ] OTHER :

Certification Number: 14-352G

PUCOID Number: 365059

Annual Report for the Year ending December 31, 2014
of
Daybreak Energy LLc

Address:

11096 Bandy Rd
Alliance, OH 44601

Website URL:
www.DaybreakEnergy.net

Filed by:
Thomas McCune
(330) 584-3911

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/

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

STATEMENT OF INTRASTATE SALES AND REVENUES *			
		Sales (Mcf)	Revenues ($)
1	Choice Program Retail Sales	0	$11,994
2	Choice Program Aggregation Sales	0	$0
3	Total Natural Gas Sales (1 + 2)	0	$11,994

* 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

thomasmccune55@gmail.com

Email

Thomas McCune

President

Name

Title

11096 Bandy Rd ALLIANCE, OH 44601

Address

(330) 584-2006

Phone Number (including Area Code)

Fiscal Contact Information

thomasmccune55@gmail.com

Email

Thomas McCune

President

Name

Title

11096 Bandy Rd ALLIANCE, OH 44601

Address

(330) 584-2006

Phone Number (including Area Code)

Ohio | 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: Mahoning

Affiant's Name: Thomas McCune

Affiant's Title: President

Reporting Entity: Daybreak Energy 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: _____

Thomas McCune

(Signature of Affiant)

State of Ohio
County of Mahoning

Sworn and subscribed before me this 21st day of April, 2015.

Joyce L. Lalu

Signature of Notary

Print name of Notary: Joyce L. Lalu

My commission expires on: 02/08/2016

JOYCE L. LALU
NOTARY PUBLIC, STATE OF OHIO
MY COMMISSION EXPIRES 2/08/2016

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)

Submitted Timestamp Date: 4/20/2015 3:47:11PM

Submitted Timestamp Date: 4/20/2015 3:47:11PM