Ohio | Public Utilities Commission

Annual Report to the Commission for Competitive Retail Electric Service

☐ **AGGREGATOR**

GOVERNMENTAL AGGREGATOR

☑ **POWER MARKETER**

RETAIL ELECTRIC GENERATION PROVIDER

POWER BROKER

Certification Number: 13-716E

PUCOID Number: 343097

Annual Report for the Year ending December 31, 2014 of XOOM Energy Ohio LLC

Address:

11208 Statesville Rd, Ste 200
Huntersville, NC 28078-7637

Website URL:
www.xoomenergy.com

Filed by:
stephanie c kueffner
(704) 274-1450

Changes: This company did not have any changes in name(s), principal address, legal status, ownership, corporate structure or operations during the 2014 reporting year.

Annual Report filings and instructions are available at:
www.puco.ohio.gov/puco/docketing/

Customer Class	Sales (kWh)	Earnings($)
Residential	53,757,054	$4,461,617
Commercial	26,420,736	$2,108,142
Industrial	0	$0
Other	0	$0
Total	**80,177,790**	**$6,569,759**

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 earnings for the provision of retail services (e.g. Retail Electric Generation, Broker, Marketer, Governmental Aggregator) for which it is subject to certification by the PUCO under Section 4928, Revised Code. In addition, power providers please provide all corresponding sales of kilowatt hours of electricity. 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.

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

Docketing Contact Information

mharding@xoomenergy.com

Email

Michelle Harding | Authorized Representative

Name | Title

11208 Statesville Road, Ste. 200 Huntersville, NC 28078

Address

(704) 274-1450

Phone Number (including Area Code)

Fiscal Contact Information

brose@xoomenergy.com

Email

Bill Rose | Director, Energy Accounting

Name | Title

11208 Statesville Road Huntersville, NC 28078

Address

(704) 274-1450

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: North Carolina
County of: Mecklenberg

Affiant's Name: Dave Vail
Affiant's Title: CEO
Reporting Entity: KDM Energy Ohio, 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: _____

_____
(Signature of Affiant)

Sworn and subscribed before me this 23rd day of April, 2015.

Tamara A Walker
Signature of Notary
Print name of Notary: Tamara A. Walker
My commission expires on: May 20, 2017

Tamara A Walker
Notary Public
Mecklenburg County
North Carolina

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)

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