



Certification Number: 89-8009

PUCOID Number: 300428

**Annual Report for the Year ending December 31, 2014
of
Foraker Gas Company Inc**

Address:

420 S State St
New Lexington, OH 43764

Website URL:

N/A

Filed by:

Janet Stanton
(740) 342-2852

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/

**STATEMENT OF INTRASTATE GROSS EARNINGS (REVENUE)
FOR OHIO AT CLOSE OF YEAR**

Amount (in dollars)

Acct. No.	Item	Total Company (1)	Intrastate (Other than Ohio) 2	Ohio Intrastate (3)= (1)-(2)
400	Gas Operating Revenues	\$624,086	\$0	\$624,086
411.6	Gains From Disposition of Utility Property	\$0	\$0	\$0
412	Revenue From Gas Plant Leased to Others	\$0	\$0	\$0
414	Other Utility Operating Income	\$0	\$0	\$0
415	Revenues from Merch., Jobbing & Contract Work	\$0	\$0	\$0
417	Revenues From Nonutility Operations	\$8,328	\$0	\$8,328
418	Nonoperating Rental Income	\$0	\$0	\$0
418.1	Equity in Earnings of Subsid. Co.	\$0	\$0	\$0
419	Interest & Dividend Income	\$7	\$0	\$7
421	Miscellaneous Nonoperating Income	\$16,618	\$0	\$16,618
421.1	Gains from Disp. Of Property	\$0	\$0	\$0
433	Extraordinary Income	\$0	\$0	\$0
	SUBTOTAL	\$649,039	\$0	\$649,039
483	Earnings or Receipts from Sales to Utilities for Resale	\$0	\$0	\$0
	Total	\$649,039	\$0	\$649,039

"Intrastate means from one point in Ohio to another point in Ohio, or wholly within Ohio."

(For the user and purposes designated in Revised Code Section 4905.10, assessment for maintaining the Public Utilities Commission of Ohio)

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

Docketing Contact Information

forakergas@yahoo.com

Email

Daniel Foraker

President

Name

Title

420 S. State Street, P. O. Box 537 New Lexington, OH 43764

Address

(740) 342-2852

Phone Number (including Area Code)

Fiscal Contact Information

forakergas@yahoo.com

Email

Daniel Foraker

President

Name

Title

420 S. State Street, P. O. Box 537 New Lexington, OH 43764

Address

(740) 342-2852

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: Perry

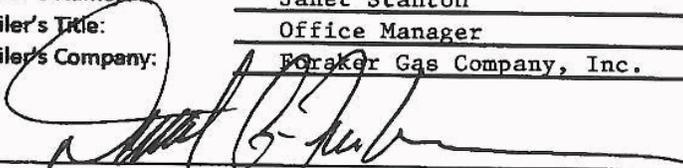
Affiant's Name: Daniel G. Foraker
Affiant's Title: President
Reporting Entity: Foraker Gas Company, Inc.

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: Janet Stanton
Filer's Title: Office Manager
Filer's Company: Foraker Gas Company, Inc.


(Signature of Affiant)

Sworn and subscribed before me this 17 day of April, 2015.


Signature of Notary
Print name of Notary: LeAnn Brown Wells
My commission expires on: 12-29-2015



LeAnn Brown Wells
Notary Public - Ohio
My Commission Expires 12-29-2015
electronically filed 12-29-2015
Entity accurately

DECLARATION OF FILER:

The above indicated Filer, if applicable, hereby verifies that the Annual Report 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)