



Annual Report for Fiscal Assessment  
for the Year ending December 31, 2015  
of

**Swickard Gas Company**

**PUCOID No.: 300684**

**Certificate No.: 89-8028**

209 State St  
Bettsville, OH 44815

Website URL: N/A

Filed By:  
Dean Armstrong  
(419) 986-5171

Changes in company name(s), principal address, legal status, ownership, or corporate structure during the reporting year, or supplemental data:

*Not Applicable*

Annual Report filings and instructions are available at:  
<http://www.puco.ohio.gov/puco/index.cfm/docketing/annual-reports/>

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

Amount (in dollars)

Account No.	Item	Total Company (1)	Intrastate (Other than Ohio) (2)	Ohio Intrastate (3) = (1)-(2)
400	Gas Operating Revenues	\$452,631	\$0	\$452,631
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	\$2,204	\$0	\$2,204
417	Revenues From Nonutility Operations	\$0	\$0	\$0
418	Nonoperating Rental Income	\$0	\$0	\$0
418.1	Equity in Earnings of Subsid. Co.	\$0	\$0	\$0
419	Interest & Dividend Income	\$0	\$0	\$0
421	Miscellaneous Nonoperating Income	\$0	\$0	\$0
421.1	Gains from Disp. Of Property	\$0	\$0	\$0
433	Extraordinary Income	\$0	\$0	\$0
	<b>SUBTOTAL</b>	<b>\$454,835</b>	<b>\$0</b>	<b>\$454,835</b>
483	Earnings or Receipts from Sales to Utilities for Resale	(\$0)	(\$0)	(\$0)
	<b>TOTAL</b>	<b>\$454,835</b>	<b>\$0</b>	<b>\$454,835</b>

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

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

### **Docketing Contact Information**

sgc@swickardgas.com

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*Email*

Dean Armstrong

Vice President

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*Name*

*Title*

209 State St., PO Box 387 Bettsville, OH 44815

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*Address*

(419) 986-5171

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*Phone Number (including Area Code)*

### **Fiscal Contact Information**

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*Email*

Eileen Armstrong

President

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*Name*

*Title*

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