

UNCONVENTIONAL GAS WELL FUND USAGE REPORT

Calendar Year Reporting: 2021 **SAP Vendor No.:** 141994

County: Sullivan **Name of Municipality:** Colley Township

County / Municipal Website: www.sullivancounty-pa.us

Contact Name: William Stasiak **Title:** Supervisor

Address: 5815 Rt. 487 **Email Address:** colleytpw@epix.net

Address 2: _____ **Telephone No.:** 570-928-7456

City: Lopez **State:** PA **Zip Code:** 18628

TOTAL AMOUNT OF FUNDS RECEIVED: 57990

USE OF UNCONVENTIONAL GAS WELL FUNDS

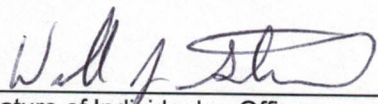
AMOUNT

| USE OF UNCONVENTIONAL GAS WELL FUNDS | AMOUNT |
|--|--------------|
| 1. Construction, reconstruction, maintenance and repair of roadways, bridges and public infrastructure. | 57990 |
| 2. Water, storm water and sewer systems, including construction, reconstruction, maintenance and repair | |
| 3. Emergency preparedness and public safety, including law enforcement and fire services, hazardous material response, 911, equipment acquisition and other services | |
| 4. Environmental programs, including trails, parks and recreation, open space, flood plain management, conservation districts and agricultural preservation | |
| 5. Preservation and reclamation of surface and subsurface waters and water supplies | |
| 6. Tax reductions, including homestead exclusions | |
| 7. Projects to increase the availability of safe and affordable housing to residents | |
| 8. Records management, geographic information systems and information technology | |
| 9. The delivery of social services | |
| 10. Judicial services | |
| 11. Deposit into the municipality's capital reserve fund if the funds are used solely for a purpose set forth in Act 13 of 2012 | |
| 12. Career and technical centers for training of workers in the oil and gas industry | |
| 13. Local or regional planning initiatives under the act of July 31, 1968 (P.L. 805, No. 247), known as the Pennsylvania Municipalities Planning Code | |
| 14. TOTAL FUND USAGE (This amount must equal the amount entered in the "Total Amount of Funds Received" space above) | 57990 |

County: Sullivan Name of Municipality: Colley Township

VERIFICATION STATEMENT

I, the undersigned, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing, if one is deemed necessary by the Public Utility Commission, in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).



Signature of Individual or Officer

4-15-22

Date

Name of person to be contacted for additional information: Trish Fluck

Phone Number: 570-928-7456

Email: colleytwp@epix.net