Sample Format

Natural Gas Imports by Pipeline
Monthly Sales and Price Report

Month/Year: _____ **Importer (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Origin	Point of ENTRY into U.S.	Volume (Mcf at U.S. Border)	Avg. Price at U.S. Border (U.S.$/MMBtu)	Supplier(s)	Foreign Transporter	U.S. Transporter	Markets Served - U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

Send to: **The Office of Fossil Energy, Natural Gas Regulatory Activities, U.S. Dept. of Energy, FE-34, P.O. Box 44375**
Washington, D.C. 20026-4375, Attention: Yvonne Caudillo, Telephone No. (202) 586-4587
Fax Number (202) 586-6050. E-Mail: yvonne.caudillo@hq.doe.gov.

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Sample Format

Natural Gas Exports by Pipeline
Monthly Sales and Price Report

Month/Year: _____ **Exporter (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Destination Country	Point of EXIT from U.S.	Volume (Mcf at U.S. Border)	Avg. Price at U.S. Border (U.S.$/MMBtu)	Supplier(s)	Foreign Transporter	U.S. Transporter	Estimated Duration of Supply Contract

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Sample Format

In-Transit Natural Gas (Pipeline)
Monthly Sales and Price Report

Month/Year: _____ **Importer/Exporter (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Origin & Final Destination Country (one country)	Transit Country	Initial Border Crossing Point	Foreign Transporter at Initial Border Crossing	U.S. Transporter at Initial Border Crossing	Final Border Crossing Point	Foreign Transporter at Final Border Crossing	U.S. Transporter at Final Border Crossing	Volume (Mcf at U.S. Border)

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Fax Number (202) 586-6050. E-Mail: yvonne.caudillo@hq.doe.gov.

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Sample Format

LNG Imports (Vessel)
Monthly Sales and Price Report

Month/Year: _____ **Importer (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Delivery Date	Country of Origin	Supplier	Cargo Volume (Mcf)	U.S. Receiving Terminal	Landed Price (US$/MMBtu)	LNG Vessel	Specific Purchaser / End User	Markets Served - U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

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Sample Format

LNG Exports (Vessel)
Monthly Sales and Price Report

Month/Year: _____ **Exporter (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Departure Date	Country of Destination	Supplier	Cargo Volume (Mcf)	U.S. Export Terminal	Delivered Price (US$/MMBtu)	LNG Vessel	Specific Purchaser / End User	Estimated Duration of Supply Contract

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Sample Format

LNG Imports (Truck)
Monthly Sales and Price Report

Month/Year: _____ **Importer (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Origin	International Point of Entry	U.S. Receiving Facility	Volume (Mcf at U.S. Border)	Price at U.S. Border (US$/MMBtu)	Supplier	LNG Transporter	Markets Served - U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

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Sample Format

LNG Exports (Truck)
Monthly Sales and Price Report

Month/Year: _____ **Exporter (Authorization Holder):**_____

E-Mail Address:_____ **Address:**_____

Preparer of Report:_____ **Telephone No.:**_____ **FAX No.:**_____

Gas Sales Made Pursuant to DOE Opinion and Order No._____**, under FE Docket No.**_____**.**

Please check one: ____ **Long-Term Authorization** ____ **Short-Term / Blanket Authorization**

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Destination	International Point of Exit	U.S. Departure Facility	Volume (Mcf at U.S. Border)	Price at U.S. Border (US$/MMBtu)	Supplier	LNG Transporter	Specific Purchaser / End User	Estimated Duration of Supply Contract

Send to: **The Office of Fossil Energy, Natural Gas Regulatory Activities, U.S. Dept. of Energy, FE-34, P.O. Box 44375 Washington, D.C. 20026-4375, Attention: Yvonne Caudillo, Telephone No. (202) 586-4587 Fax Number (202) 586-6050. E-Mail: yvonne.caudillo@hq.doe.gov.**

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