



Independent Statistics & Analysis

U.S. Energy Information Administration

FORM EIA-826
MONTHLY ELECTRIC SALES AND REVENUE
WITH STATE DISTRIBUTIONS REPORT

OMB NO.1905-0129
Approval Expires: xx/xx/xxxx
Burden Hours: 1.37

NOTICE: This report is mandatory under the Federal Energy Administration Act of 1974 (Public Law 93-275). Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For further information concerning sanctions and data protections see the provision on sanctions and the provision concerning the confidentiality of information in the instructions. Title 18 USC 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false, fictitious, or fraudulent statements as to any matter within its jurisdiction.

SCHEDULE 1. IDENTIFICATION

Who is the survey contact?

-Contact EIA by email at EIA-826@eia.gov to correct or update this information

Form fields for survey contact: First Name, Last Name, Title, Telephone, Fax, Email

Who is the survey contact's supervisor?

-Contact EIA by email at EIA-826@eia.gov to correct or update this information

Form fields for survey contact's supervisor: First Name, Last Name, Title, Telephone, Fax, Email

What company is the form being completed for?

Form fields for company: Company Name, Company ID

Enter the month and year that data are being reported for: [Month] 2013

Respondent Type

Form fields for Respondent Type: Federal, Political Subdivision, Municipal Marketing Authority, Cooperative, Independent Power Producer or Qualifying Facility, State, Municipal, Investor-Owned, Retail Power Marketer (or Energy Service Provider)



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SCHEDULE 2. PART A. SALES TO ULTIMATE CUSTOMERS - FULL SERVICE - ENERGY AND DELIVERY SERVICE (BUNDLED)

Table with 7 columns: State, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Revenue (thousand dollars), Megawatt hours Sold and Delivered (MWh), and Number of Customers. Multiple identical table blocks are present.

Note:



Company Name:
 Company ID: Reporting Month: Reporting Year:

SCHEDULE 2. PART B. SALES TO ULTIMATE CUSTOMERS - ENERGY-ONLY SERVICE (WITHOUT DELIVERY SERVICE)

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours (MWh) (To nearest 0.001)					0
Number of Customers					0
Names of Companies within each State providing Delivery Service					

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours (MWh) (To nearest 0.001)					0
Number of Customers					0
Names of Companies within each State providing Delivery Service					

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours (MWh) (To nearest 0.001)					0
Number of Customers					0
Names of Companies within each State providing Delivery Service					

Note:



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SCHEDULE 2. PART C. SALES TO ULTIMATE CUSTOMERS - DELIVERY-ONLY SERVICE (AND ALL OTHER CHARGES)

Table with 7 columns: State, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Revenue, Megawatt hours, Number of Customers, and List Names of Companies for three different states.

Note:



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Company Name:
 Company ID: Reporting Month: Reporting Year:

SCHEDULE 2. PART D. SALES TO ULTIMATE CUSTOMERS - BUNDLED SERVICE BY RETAIL ENERGY PROVIDERS, OR ANY POWER MARKETER THAT PROVIDES "BUNDLED SERVICE."

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours Delivered (MWh) (To nearest 0.001)					0
Number of Customers					0

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours Delivered (MWh) (To nearest 0.001)					0
Number of Customers					0

State	RESIDENTIAL (a)	COMMERCIAL (b)	INDUSTRIAL (c)	TRANSPORTATION (d)	TOTAL (e)
Revenue (thousand dollars) (To nearest 0.001)					\$0
Megawatt hours Delivered (MWh) (To nearest 0.001)					0
Number of Customers					0

Note:



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SCHEDULE 3. PART B. NET METERING

Net Metering programs allow customers to sell excess power they generate back to the electrical grid to offset consumption. Provide the information about programs by State, balancing authority, customer class, and technology for all net metering applications.

Table with columns: STATE, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Photovoltaic, Wind, Other, and Total, with sub-rows for Capacity, Customers, and Energy Sold Back.



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SCHEDULE 3. PART C. ADVANCED METERING

Only customers from schedule 2A and 2C need to be reported on this schedule.

Automated Meter Reading (AMR)- data transmitted one-way, from customer to utility.

Advanced Metering Infrastructure (AMI) - data can be transmitted in both directions, between the delivery entity and the customer.

Table with 7 columns: STATE, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Number of AMR Meters, Number of AMI Meters, Energy Served Through AMI (MWh), Number of non AMI/AMR Meters, and Total Number of Meters (All Types).

Table with 7 columns: STATE, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Number of AMR Meters, Number of AMI Meters, Energy Served Through AMI (MWh), Number of non AMI/AMR Meters, and Total Number of Meters (All Types).

Table with 7 columns: STATE, RESIDENTIAL (a), COMMERCIAL (b), INDUSTRIAL (c), TRANSPORTATION (d), TOTAL (e). Rows include Number of AMR Meters and Number of AMI Meters.

Energy Served Through AMI (MWh) (To nearest 0.001)						0
Number of non AMI/AMR Meters						0
Total Number of Meters (All Types)	0	0	0	0	0	0

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SCHEDULE 4 MERGERS and/or ACQUISITIONS

Were there any mergers and/or acquisitions during the reporting period ?

Yes
 No (if no, skip to Schedule 5)

If yes, provide:

Date of merger or acquisition
Company merged with or acquired
Name of new parent company
Address
City State Zip
First Name Last Name
Telephone
Email

