

OMB No. 1905-0175

Expiration Date: 12/31/2020

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Product No.: 2020.01 Burden: 2.0 hours

MONTHLY NATURAL GAS MARKETER SURVEY FORM EIA-910

This report is mandatory under 15 U.S.C. §772. Failure to comply may result in criminal fines, civil penalties and other sanctions as provided by law. For the sanctions and the provisions concerning the confidentiality of information submitted on this form, see instructions. 18 U.S.C. §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.

| PART 1. RESPONDENT IDENTIFICATION DATA | | PART 2. SUBMIS | PART 2. SUBMISSION INFORMATION | | |
|--|--|---|---|-----------------------------------|--|
| REPORT PERIOD: | Month: Year: 2 0 | Completed form | m(s) must be filed no lat th. | ter than 30 days after | |
| EIA ID NUMBER: 9 1 0 | | Form must be s | Form must be submitted via Secure File Transfer : | | |
| If this is a resubmission, enter an "X" in the box: | | https://si | https://signon.eia.doe.gov/upload/noticeoog.jsp | | |
| | dentification Data has changed since the last report, | | | | |
| enter an "X" in the | | Questions? | Call: (877) 800-5261 | Ī | |
| Company Name: | | Quoonono. | Ca (01.) 000 0202 | - | |
| Contact Name: | | - | | | |
| Phone No.: | Ext: | - | | | |
| Fax No.: | | | | | |
| Address 1: | | | | | |
| Address 2: | | - | | | |
| City: | State: Zip: - | - | | | |
| Email address: | | - | | | |
| PART 3. NATURAL | CASSALES | - | | | |
| | ollowing information for your residential and commerc | cial customers as defi | ned in the instructions: | | |
| or Ohio. Subrresidential and 2. To how many 3. How much nat Do not reproubic feet (appropriate 4. For companies What were service cha | mit a separate form for each State in which your com d/or commercial end-use customers. end-use customers did you sell natural gas? tural gas did you sell to these customers? fort negative numbers or decimals. You may report in (Mcf) or in Therms. Indicate unit of measure by place | n either Thousand cing an "X" in the d, plus customer | Residential (Number of Residential Mcf Therm Residential (Doll | Commercial Mcf Therm Commercial | |
| 5. For companies | s reporting sales in Georgia : | | | | |
| What were the gross receipts for the natural gas commodity sold, proceedings service charges, taxes and other charges, including any amount of distribution company who transported gas to your customers? | | | Residential | Commercial | |
| | | | (Dollars) | | |
| Comments: Identify an | ny unusual aspects of your reporting month's activity. | | | | |
| | | | | | |