For questions call: 717-783-6806 e-mail Reports to: RA-Act13-Fiscal@pa.gov

UNCONVENTIONAL GAS WELL FUND USAGE REPORT

Calendar Year Reporting: 2014	SAP Vendor No.: 35	5-09
County: Westmoreland Name of Municipali	ty: <u>Derry Towns</u>	hip
County / Municipal Website: derrytownship.co	m	
Contact Name: <u>David Slifka</u>	Title: <u>Vice Chairman</u>	/Sec/Treas
Address: 5 <u>321 State Route 982</u>		k@comcast.net
Address 2:	724/ Telephone No.: 694–8	
Dity: Derry State: PA Zip Code: 15627		
TOTAL AMOUNT OF CUMPS DECEMED. \$428.32	1 83	
TOTAL AMOUNT OF FUNDS RECEIVED: \$428,32	.1.03	
USE OF UNCONVENTIONAL GAS WELL FUNDS		AMOUNT
Construction, reconstruction, maintenance and repair of roadways, bridges and public infrastructure.		\$302,805.75
Water, storm water and sewer systems, including construction, reconstruction, maintenance and repair		26,709.60
3. Emergency preparedness and public safety, including law enforcement and fire services, hazardous material response, 911, equipment acquisition and other services		70,484.65
4. Environmental programs, including trails, parks and recognition management, conservation districts and agricultum.		
5. Preservation and reclamation of surface and subsurface supplies	e waters and water	
6. Tax reductions, including homestead exclusions		
7. Projects to increase the availability of safe and afforda	ble housing to residents	
8. Records management, geographic information system technology	s and information	
9. The delivery of social services		
10. Judicial services		
11. Deposit into the municipality's capital reserve fund if a purpose set forth in Act 13 of 2012	the funds are used solely for	28,321.83
12. Career and technical centers for training of workers in	n the oil and gas industry	
13. Local or regional planning initiatives under the act of 247), known as the Pennsylvania Municipalities Plann		
14. TOTAL FUND USAGE (This amount must equal the ar Amount of Funds Received" space above)	mount entered in the "Total	\$428,321.83

Calendar Year Reporting: 2014	SAP Vendor N	No.: 355-09
County:Westmoreland N	ame of Municipality: <u>Derry T</u>	ownship
VERIF	FICATION STATEMENT	
I, the undersigned, hereby state that the	facts above set forth are true and co	orrect (or are true and correct
to the best of my knowledge, information	on and belief) and that I expect to be	e able to prove the same at a
hearing, if one is deemed necessary by	the Public Utility Commission, in t	his matter. I understand that
the statements herein are made subject t	to the penalties of 18 Pa.C.S. § 490	4 (relating to unsworn
falsification to authorities).		
ŕ		
Signature of Individual or Officer		
Sand a Rollin		12/12/14
Signature of Individual or Officer		Date
	David Sl	ifka
Name of person to be contacted for addition	onal information:	TTVG

Phone Number: 724/640-0718

Email: <u>dslifk@comcast.net</u>