

# Vermont Energy Efficiency Utility Fund FY 2014 Remittance Worksheet BED USE ONLY

A. Company Code <b>VTE</b> -
B. Submission Date

C. Revenue Data Month			
Jan-14	Apr-14	Jul-14	Oct-14
Feb-14	May-14	Aug-14	Nov-14
Mar-14	Jun-14	Sep-14	Dec-14
D. Original		Revision	

Please read complete instructions before completing.

SECTION 1 - ENERGY UTILITY IDENTIFICATION	
1a. Company Name:	
1b. Complete Mailing Address:	
1c. Telephone:	
1d. Fax:	
1e. E-Mail Address:	

SECTION 2 - KILOWATT HOURS	
<b>Residential:</b>	
2a. Kilowatt Hours	_____ x \$0.00798 per kWh = \$ _____
<b>Commercial</b>	
2b. Non-Demand Customers - Sales	_____ x \$0.00709 per kWh = \$ _____
2c. Demand Customers - Sales	_____ x \$0.00429 per kWh = \$ _____
2d. Demand Customers - Billed Capacity	_____ x \$1.1286 per KW/Month = \$ _____
<b>Industrial</b>	
2e. Non-Demand Customers - Sales	_____ x \$0.00571 per kWh = \$ _____
2f. Demand Customers - Sales	_____ x \$0.00379 per kWh = \$ _____
2g. Demand Customers - Billed Capacity	_____ x \$1.4752 per KW/Month = \$ _____
<b>Street and Area Lights:</b>	
2h. Kilowatt Hours	_____ x \$0.0071 per kWh = \$ _____
(Multiply the light wattage by 354 or pre-approved rate per month)	

SECTION 3 - REMITTANCE CALCULATION	
3a. Total Remittance Due to the Vermont EEU (Total of Lines 2a through 2h)	\$ _____

SECTION 4 - CERTIFICATION			
Under penalties as provided by law, I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I further acknowledge the Fiscal Agent's authority to request additional supporting information as may be necessary.			
4.	_____	_____	_____
	Date	Officer Name	Officer Signature
5.	_____	_____	_____
	Date	Preparer Name	Preparer Signature
6.	_____		
	Preparer Complete Mailing Address		
7.	_____	_____	_____
	Preparer Telephone	Preparer Fax	Preparer E-Mail Address

<p style="text-align: center; margin: 0;"><b>PAYMENT INFORMATION</b></p> <p style="margin: 0;"><b>Make Check Payable to "VEEU" and send with worksheet to:</b></p> <p style="margin: 0;">c/o Batchelder Associates, Fiscal Agent 1 Conti Circle, Suite#1 Barre, Vermont 05641</p> <p style="margin: 0; text-align: right;">Payment Method: Check    Wire    ACH    Amount \$</p>	<p style="text-align: center; margin: 0;"><b>Questions? Please Contact:</b></p> <p style="margin: 0;">Bonnie K. Batchelder, CPA Batchelder Associates, PC 1 Conti Circle, Suite#1 Barre, Vermont 05641 Phone (802)476-9490 Fax (802)476-7018 Email: <a href="mailto:bbatchelder@batcheldercpa.com">bbatchelder@batcheldercpa.com</a> Website: <a href="http://batcheldercpa.com">batcheldercpa.com</a></p>
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