

## UNCONVENTIONAL GAS WELL FUND USAGE REPORT

Calendar Year Reporting: 2023 SAP Vendor No.: 4200521160

County: Armstrong Name of Municipality: East Franklin Township

County / Municipal Website: eastfranklintownship.com www.co.armstrong.pa.us

Contact Name: Barry Peters Title: Chairman

Address: 106 Cherry Orchard Avenue Email Address: dcomman@eastfranklintownship.com

Address 2: \_\_\_\_\_ Telephone No.: 724-548-2310 ext: 1

City: Kittanning State: PA Zip Code: 16201

TOTAL AMOUNT OF FUNDS RECEIVED: \$287,473.33

### USE OF UNCONVENTIONAL GAS WELL FUNDS

### AMOUNT

USE OF UNCONVENTIONAL GAS WELL FUNDS	AMOUNT
1. Construction, reconstruction, maintenance and repair of roadways, bridges and public infrastructure.	\$177,473.33
2. Water, storm water and sewer systems, including construction, reconstruction, maintenance and repair	\$30,000.00
3. Emergency preparedness and public safety, including law enforcement and fire services, hazardous material response, 911, equipment acquisition and other services	\$50,000.00
4. Environmental programs, including trails, parks and recreation, open space, flood plain management, conservation districts and agricultural preservation	\$30,000.00
5. Preservation and reclamation of surface and subsurface waters and water supplies	
6. Tax reductions, including homestead exclusions	
7. Projects to increase the availability of safe and affordable housing to residents	
8. Records management, geographic information systems and information technology	
9. The delivery of social services	
10. Judicial services	
11. Deposit into the municipality's capital reserve fund if the funds are used solely for a purpose set forth in Act 13 of 2012	
12. Career and technical centers for training of workers in the oil and gas industry	
13. Local or regional planning initiatives under the act of July 31, 1968 (P.L. 805, No. 247), known as the Pennsylvania Municipalities Planning Code	
<b>TOTAL FUND USAGE</b>	<b>\$287,473.33</b>

Calendar Year Reporting: 2023

SAP Vendor No.: 4200521160

County: Armstrong

Name of Municipality: East Franklin Township

### VERIFICATION STATEMENT

I, the undersigned, hereby state that the facts above set forth are true and correct (or are true and correct to the best of my knowledge, information and belief) and that I expect to be able to prove the same at a hearing, if one is deemed necessary by the Public Utility Commission, in this matter. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities).



Chairman

12/21/23

Signature of Individual or Officer

Date

Name of person to be contacted for additional information: Debra L. Cornman, Secretary/Treasurer

Phone Number 724-548-2310

Email: dcornman@eastfranklintownship.com