

Natural Gas Imports by Pipeline

Monthly Sales and Price Report

Month/Year: _____ Importer (Authorization Holder): _____

E-Mail Address: _____ Address: _____

Preparer of Report: _____ Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____

Please check one: _____ Long-Term Authorizator _____ Short-Term / Blanket Authorizator

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Origin	Point of ENTRY into U.S.	Volume (Mcf at U.S. Border)	Avg. Price at U.S. Border (U.S.\$/MMBtu)	Supplier(s)	Foreign Transporter	U.S. Transporter	Markets Served - U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

Send to: **The Office of Fossil Energy, Natural Gas Regulatory Activities, U.S. Dept. of Energy, FE-34, P.O. Box 4437
 Washington, D.C. 20026-4375, Attention: Yvonne Caudillo, Telephone No. (202) 586-4588
 Fax Number (202) 586-6050. E-Mail: yvonne.caudillo@hq.doe.gov**

Natural Gas Exports by Pipeline Monthly Sales and Price Report

Month/Year: _____ Exporter (Authorization Holder): _____

E-Mail Address: _____ Address: _____

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Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____.

Please check one: Long-Term Authorization Short-Term / Blanket Authorization

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Destination Country	Point of EXIT from U.S.	Volume (Mcf at U.S. Border)	Avg. Price at U.S. Border (U.S.\$/MMBtu)	Supplier(s)	Foreign Transporter	U.S. Transporter	Estimated Duration of Supply Contract

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Sample Format

In-Transit Natural Gas (Pipeline) Monthly Sales and Price Report

Month/Year: _____ Importer/Exporter (Authorization Holder): _____

E-Mail Address: _____ Address: _____

Preparer of Report: _____ Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____

Please check one: Long-Term Authorizatiior Short-Term / Blanket Authorizatiior

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Origin & Final Destination Country (one country)	Transit Country	Initial Border Crossing Point	Foreign Transporter at Initial Border Crossing	U.S. Transporter at Initial Border Crossing	Final Border Crossing Point	Foreign Transporter at Final Border Crossing	U.S. Transporter at Final Border Crossing	Volume (Mcf at U.S. Border)

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LNG Imports (Vessel)

Monthly Sales and Price Report

Month/Year: _____ Importer (Authorization Holder): _____

E-Mail Address: _____ Address: _____

Preparer of Report: _____ Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____.

Please check one: Long-Term Authorization Short-Term / Blanket Authorization

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Delivery Date	Country of Origin	Supplier	Cargo Volume (Mcf)	U.S. Receiving Terminal	Landed Price (US\$/MMBtu)	LNG Vessel	Specific Purchaser / End User	Markets Served U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

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LNG Exports (Vessel)

Monthly Sales and Price Report

Month/Year: _____ Exporter (Authorization Holder): _____

E-Mail Address: _____ Address: _____

Preparer of Report: _____ Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____.

Please check one: ___ Long-Term Authorization ___ Short-Term / Blanket Authorization

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Departure Date	Country of Destination	Supplier	Cargo Volume (Mcf)	U.S. Export Terminal	Price at Export Point (US\$/MMBtu)	LNG Vessel	Specific Purchaser / End User	Estimated Duration of Supply Contract

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LNG Imports (Truck)

Monthly Sales and Price Report

Month/Year: _____ Importer (Authorization Holder): _____

E-Mail Address: _____ Address: _____

Preparer of Report: _____ Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____.

Please check one: _____ Long-Term Authorization _____ Short-Term / Blanket Authorization

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Origin	International Point of Entry	U.S. Receiving Facility	Volume (Mcf at U.S. Border)	Price at U.S. Border (US\$/MMBtu)	Supplier	LNG Transporter	Markets Served - U.S. Area* (Census Region or state, if known)	Estimated Duration of Supply Contract

*U.S. geographic areas, for the purpose of this report, are: Northeast, Midwest, South, West

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LNG Exports (Truck)

Monthly Sales and Price Report

Month/Year: _____ Exporter (Authorization Holder): _____

E-Mail Address: _____

Address: _____

Preparer of Report: _____

Telephone No.: _____ FAX No.: _____

Gas Sales Made Pursuant to DOE Opinion and Order No. _____, under FE Docket No. _____.

Please check one: Long-Term Authorization Short-Term / Blanket Authorization

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
Country of Destination	International Point of Exit	U.S. Departure Facility	Volume (Mcf at U.S. Border)	Price at U.S. Border (US\$/MMBtu)	Supplier	LNG Transporter	Specific Purchaser / End User	Estimated Duration of Supply Contract

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