

FOR Entire Area Served
Community, Town or City

P.S.C. KY. NO. _____

SHEET NO. _____

Sigma Gas Corporation
(Name of Utility)

CANCELLING P.S.C. KY. NO. _____

SHEET NO. _____

RATES & CHARGES

RATE SCHEDULE: Applicable in all territory served by Company

AVAILABILITY OF SERVICE: For all residential and commercial purposes.

<u>RATE:</u>	<u>BASE RATE</u>	<u>GAS COST RECOVERY</u>	<u>TOTAL</u>
First MCF (minimum bill)	\$6.2500	\$12.58	\$18.83
Over 1 MCF	\$4.5522	\$12.58	\$17.13

MINIMUM BILL

\$18.83

CANCELLED
10-1-06

DATE OF ISSUE _____
Month / Date / Year

DATE EFFECTIVE JANUARY 1, 2006
Month / Date / Year

ISSUED BY _____
(Signature of Officer)

TITLE Stanley Howard

BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION

IN CASE NO. 2005-00524 DATED 12/21/05

PUBLIC SERVICE COMMISSION
OF KENTUCKY
EFFECTIVE
1/1/2006
PURSUANT TO 807 KAR 5:011
SECTION 9 (1)

By [Signature]
Executive Director

FOR Entire Area Served
Community, Town or City

P.S.C. KY. NO. _____

_____ SHEET NO. _____

Sigma Gas Corporation
(Name of Utility)

CANCELLING P.S.C. KY. NO. _____

_____ SHEET NO. _____

RATES & CHARGES

RATE SCHEDULE: Applicable in all territory served by Company

AVAILABILITY OF SERVICE: For all residential and commercial purposes.

<u>RATE:</u>	<u>BASE RATE</u>	<u>GAS COST RECOVERY</u>	<u>TOTAL</u>
First MCF (minimum bill)	\$6.2500	\$14.2451	\$20.4951
Over 1 MCF	\$4.5522	\$14.2451	\$18.7973
MINIMUM BILL			\$20.4951

CANCELLED
1-1-06

DATE OF ISSUE _____
Month / Date / Year

DATE EFFECTIVE OCTOBER 2, 2005
Month / Date / Year

ISSUED BY [Signature]
(Signature of Officer)

TITLE Mayor City of Salyersville

BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION
IN CASE NO. 2005-00366 DATED 9-23-2005

PUBLIC SERVICE COMMISSION
OF KENTUCKY
EFFECTIVE
10/2/2005
PURSUANT TO 807 KAR 5:011
SECTION 9 (1)
By [Signature]
Executive Director