



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: 1006 Partners LLC
Contact Name Randy Boysun
SSN/Tax ID 20-5666858

270460

Service Address 1004 & 1006 First Ave. South
Phone Number 406-761-4645

Mailing Address 1000 First Avenue South
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Randy Boysun
Owner Signature

9/14/07
Date

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	1541331-3	EG93391210	1006 First Ave. So.
Northwestern Energy	1541328-9	EG60349929	1004 First Ave. So.

Optional Customer Service



Electric City Power

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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Thomas & Coleen Balzarini
Contact Name Thomas & Coleen Balzarini
SSN/Tax ID 517-60-1406

220700

Service Address 3230 2nd Ave S
Home Phone Number 406-727-0784

Mailing Address 3230 2nd Ave S
City, State, ZIP Great Falls, MT 59405

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Coleen Balzarini 8/31/07
Owner Signature **Date**

Northwestern Energy 0349569-4 3230 2nd Ave S
Current Supplier **Account #** **Meter #** **Meter Address**

Optional Customer Service Contract



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p>	<p>Monthly usage: 250 kWh 500 kWh 1000 kWh 2000 kWh No usage variation applies</p> <p>Effective price - Supply: \$0.0472090 10/1/2007 thru 6/30/2008 \$0.0508300 7/1/2008 thru 12/31/2008 \$0.0513400 1/1/2009 thru 6/30/2009 \$0.0518500 7/1/2009 thru 6/30/2010 \$0.0523700 7/1/2010 thru 6/30/2011</p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>
<p>CONTRACT:</p>	<p>Contract length: 4 years 10/1/2007-6/30//2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

Handwritten signature and date 8/31/07

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract



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Name on Account: Thomas & Coleen Balzarini
Contact Name Thomas & Coleen Balzarini
SSN/Tax ID 517-60-1406

Service Address 3230 2nd Ave S
Home Phone Number 727-0784

Mailing Address 3230 2nd Ave S
City, State, ZIP Great Falls, MT 59405

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Thomas J. Balzarini
Owner Signature

9/12/15
Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0349569-4		3230 2nd Ave S

FAX TO: Martha Capps 452-8048

3 pages



Electric City Power

A Service of the City of Great Falls

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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Bennett Motors
Contact Name Bennett, Carl
SSN/Tax ID 810 288 455

Service Address 825 1st Ave S
Phone Number 406

Mailing Address PO Box 2267
City, State, ZIP Great Falls, MT 59403

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Carl P. Bennett 9/6/07
Owner Signature **Date**

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	0367380-3		825 1st Ave S
Northwestern Energy	0685887-2		26 9th St S
Northwestern Energy	0354354-3		800 Central Ave
Northwestern Energy	0354371-7		826 Central Ave
Northwestern Energy	0354356-8		806 Central Ave
Northwestern Energy			801 Central Ave
Northwestern Energy			811 Central Ave

110830
 - 17100
 - no service



Electric City Power Incorporated

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OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
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<p>CONTRACT:</p>	<p>Contract length: 4 years 10/1/2007-6/30/2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before 9/6/07, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing 10/1/2007, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

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- A. the need to affirmatively renew service from ECP at the end of the contract



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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Randal Boysun
Contact Name Randal Boysun
SSN/Tax ID 517-56-4332

489740

Service Address 1009 35th Ave NE
Home Phone Number 406-454-1286

Mailing Address 1009 35th Ave NE
City, State, ZIP Great Falls, MT 59404

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Randal Boysun
Owner Signature

9/5/07
Date

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	1180200-6		1009 35th Ave NE

optional
inst service



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Randal Boyson *Boysun*
Contact Name Randal Boyson *Boysun*
SSN/Tax ID 517 56 4332

Service Address 1009 35th Ave NE
Home Phone Number 454-1286

Mailing Address 1009 35th Ave NE
City, State, ZIP Great Falls, MT 59404

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Randal Boyson 8/31/05
Owner Signature **Date**

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	1180200-6		1009 35th Ave NE



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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Mark & Martha Cappis
Contact Name Mark & Martha Cappis
SSN/Tax ID _____

485630

Service Address 332 36th Ave NE
Home Phone Number _____

Mailing Address 332 36th Ave NE
City, State, ZIP Great Falls, MT 59404

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Mark R Cappis _____ 9/4/07
Owner Signature **Date**

Northwestern Energy 1165017-3 _____ 332 36th Ave NE
Current Supplier **Account #** **Meter #** **Meter Address**

Optional Customer Service Contract



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<u>ELECTRICITY SUPPLY INFORMATION</u>												
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<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>											

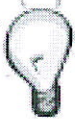
SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Lee Ebeling
Contact Name Lee Ebeling
SSN/Tax ID _____

Service Address 4700 Huckelberry Rd
Home Phone Number _____

Mailing Address 4700 Huckelberry Rd
City, State, ZIP Great Falls, MT 59404

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

[Handwritten Signature] _____ 13 Sep 07
Owner Signature Date

Current Supplier Account # Meter # Meter Address
Northwestern Energy 0637075-3 EA94034458 4700 Huckelberry Rd



LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

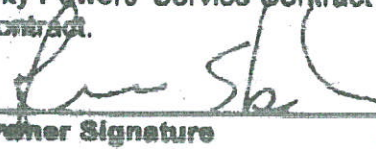
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Name on Account: Lee Ebeling
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SSN/Tax ID _____

Service Address 4700 Huckelberry Rd
Home Phone Number _____

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 _____ 13 Sep 07
Owner Signature **Date**

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	0637075-3	EA94034458	4700 Huckelberry Rd



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

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<p>CONTRACT:</p>	<p>Contract length: 4 years 10/1/2007-6/30/2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before 8/25/07, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing 10/1/07 and you agree to pay ECP for those services during that same term as stated above.

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Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

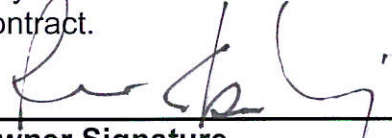
Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Lee Ebeling
Contact Name Lee Ebeling
SSN/Tax ID _____

Service Address 4700 Huckelberrv Rd
Home Phone Number _____

Mailing Address 4700 Huckelberry Rd
City, State, ZIP Great Falls, MT 59404

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 31 August 2005
Owner Signature **Date**

Northwestern Energy 0637075-3 EA94034458 4700 Huckelberry Rd
Current Supplier **Account #** **Meter #** **Meter Address**



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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: First Interstate Bank
Contact Name Weber, Bill
SSN/Tax ID 81-0331430

Service Address 425 1st Ave N
Phone Number 406-454-6225

Mailing Address PO Box 5010
City, State, ZIP Great Falls, MT 59403

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Bill Weber Pres 9-13-07
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0344257-1		425 1st Ave N
Northwestern Energy	0345303-2		211 5th St N
Northwestern Energy	0363122-3		426 2nd Ave N
Northwestern Energy	0696389-6		1401 Market Place Dr


345100
344620
463520



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

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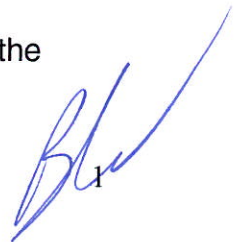
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Name on Account: First Interstate Bank
Contact Name Weber, Bill
SSN/Tax ID 81-0331430

Service Address 425 1st Ave N
Phone Number 406-454-6225

Mailing Address PO Box 5010
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Bill Weber 8-30-05
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0344257-1		425 1st Ave N
Northwestern Energy	0345303-2		211 5th St N
Northwestern Energy	0363122-3		426 2nd Ave N
Northwestern Energy	0696389-6		1401 Market Place Dr



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Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Gaare - Wilson Building Company
Contact Name Wilson, Douglas
SSN/Tax ID 81-0431477

Service Address 1000 1st Ave S
Phone Number 406-761-4645

Mailing Address P.O. 2845
City, State, ZIP Great Falls, MT 59403

270460

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Bd. Howe, PARTNER 9/13/07
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0367436-3		1000 1st Ave S

Optional Customer Service



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: George Golie
Contact Name George Golie
SSN/Tax ID 516-54-6909

Service Address 316 20th Ave S
Home Phone Number 727-3245

Mailing Address 316 20th Ave S
City, State, ZIP Great Falls, MT 59405 415120

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

George M Golie 9-7-07 (optional contract)
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0612154-5		316 20th Ave S

Electric City Power

A Service of the City of Great Falls



LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Randall Gray

Contact Name Randall Gray

SSN/Tax ID _____

Service Address 2114 3rd Ave N

Home Phone Number _____

90060

Mailing Address 2114 3rd Ave N

City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Randall H Gray

9-4-07

Owner Signature Date

Current Supplier Account # Meter # Meter Address

Northwestern Energy 0381716-0 2114 3rd Ave N

Electric City Power Incorporated

A Service of the City of Great Falls



OPTIONAL CUSTOMER SERVICE CONTRACT

ELECTRICITY SUPPLY INFORMATION

PRICE:
Effective price
(cents per
kilowatt-hour) Price
does not include
distribution, CTC-QF,
USBC or any other
charges.

Monthly usage: 250 kWh 500 kWh 1000 kWh 2000 kWh
No usage variation applies

Effective price - Supply:
\$0.0472090 7/1/2007 thru 6/30/2008
\$0.0508300 7/1/2008 thru 12/31/2008
\$0.0513400 1/1/2009 thru 6/30/2009
\$0.0518500 7/1/2009 thru 6/30/2010
\$0.0523700 7/1/2010 thru 6/30/2011

Effective price - Transmission:
\$0.07402 thru 3/30/2008
Recalculated each March in accordance with Title 5, Chapter 20,
OCCGF

Effective price - Administrative Fee
3% of the Effective Price - Supply

CONTRACT:

Contract length:

4 years
10/1/2007-6/30/2011

QUESTIONS?

Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday
through Friday

RTG 9-14-07

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

1. the need to affirmatively renew service from ECP at the end of the contract
2. the existence and operation of an automatic renewal provision provided in the contract.

This Optional Service Contract contains an automatic renewal provision. ECP will not change the terms and conditions of the contract upon the renewal date unless you have been provided with written notice of the changes at least 60 days in advance of their effective date and of the right to change suppliers rather than renew the contract. With the written notice of contract changes, ECP will provide you a letter of authorization approving the contract changes that you will need to return to ECP. Without

[Check spelling](#)



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Randall Gray
Contact Name Randall Gray
SSN/Tax ID _____

Service Address 2114 3rd Ave N
Home Phone Number _____

Mailing Address 2114 3rd Ave N
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Randall H Gray _____ 8-30-05
Owner Signature **Date**

Northwestern Energy 0381716-0 2114 3rd Ave N
Current Supplier **Account #** **Meter #** **Meter Address**



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Tim and Susan Gregori
Contact Name Tim and Susan Gregori
SSN/Tax ID 517-52-5769

Service Address 1815 Judd Circle
Home Phone Number 406-294-9527

Mailing Address 1815 Judd Circle
City, State, ZIP Billings, MT 59102

Loc # 525960

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

T.R. Gregori
Owner Signature

31 August 2007
Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	01287155-4	EA93826251	1815 Judd Circle

Standard Flat Rate
.05237

8/31/07



Electric City Power Incorporated

A Service of the City of Great Falls

STANDARD SERVICE OFFER

<u>ELECTRICITY SUPPLY INFORMATION</u>	
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p>	<p>Monthly usage: 250 kWh 500 kWh 1000 kWh 2000 kWh No usage variation applies</p> <p>Effective price - Supply: \$0.0523700 7/1/2007 thru 6/30/2011</p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p> <p style="text-align: right;"><i>Tim Meggie by me 8-31-07</i></p>
<p>CONTRACT:</p>	<p>Contract length:</p> <p>3 months (automatically renewable from 10/1/2007 through 6/31/2011, as provided below) Offer open 10/1/2007 and service available thru 9/31/2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

STANDARD SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Standard Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a three (3) month term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Standard Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract
- B. the existence and operation of an automatic renewal provision provided in the contract.



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Tim Gregori & SUSAN GREGORI
Contact Name Tim Gregori
SSN/Tax ID 517-52-5769

Service Address 1815 Judd Circle
Home Phone Number 406-294-9527

Mailing Address 1815 Judd Circle
City, State, ZIP Billings, MT 59102

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

T-R-G Susan Gregori 31 Aug 2005
Owner Signature Date

Current Supplier Account # Meter # Meter Address
Northwestern Energy 01287155-4 EA93826251 1815 Judd Circle



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Lacy & Ebeling Engineers
Contact Name Ebeling, Lee
SSN/Tax ID _____

Service Address 10 12th St S
Phone Number _____

Mailing Address 10 12th St S
City, State, ZIP Great Falls, MT 59401

5 5160

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

[Signature]
Owner Signature

13 Sept 07
Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0354448-3	EG96011676	10 12th St S



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p>	<p>Monthly usage: <u>250 kWh</u> <u>500 kWh</u> <u>1000 kWh</u> <u>2000 kWh</u> No usage variation applies</p> <p>Effective price - Supply: \$.0472090 10/1/2007 thru 6/30/2008 \$.0508300 7/1/2008 thru 12/31/2008 \$.0513400 1/1/2009 thru 6/30/2009 \$.0518500 7/1/2009 thru 6/30/2010 \$.0523700 7/1/2010 thru 6/30/2011</p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>
<p>CONTRACT:</p>	<p>Contract length:</p> <p>4 years 10/1/2007-6/30//2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before 30 Sep 07, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing 15 Sep 07, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Lacy & Ebeling Engineers
Contact Name Ebeling, Lee
SSN/Tax ID _____

Service Address 10 12th St S
Phone Number _____

Mailing Address 10 12th St S
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

[Signature] _____ 13 Sept 07
Owner Signature Date

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	0354448-3	EG96011676	10 12th St S



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

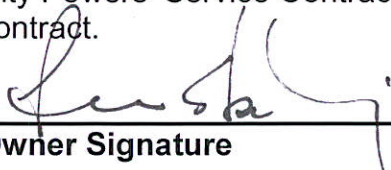
Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Lacy & Ebeling Engineers
Contact Name Ebeling, Lee
SSN/Tax ID _____

Service Address 10 12th St S
Phone Number _____

Mailing Address 10 12th St S
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

 30 Aug. 05
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0354448-3	EG96011676	10 12th St S



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: John W Lawton
Contact Name John W Lawton
SSN/Tax ID _____

Service Address 1406 3RD W Hill Dr
Home Phone Number _____

Mailing Address 1406 3RD W Hill Dr
City, State, ZIP Great Falls, MT 59405

359320

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

September 10, 2007

Owner Signature

Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0394294-3		1406 3 RD W Hill Dr

Standard Service Offer



Electric City Power Incorporated

A Service of the City of Great Falls

STANDARD SERVICE OFFER

<u>ELECTRICITY SUPPLY INFORMATION</u>	
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p>	<p>Monthly usage: 250 kWh 500 kWh 1000 kWh 2000 kWh No usage variation applies</p> <p>Effective price - Supply: \$0.0523700 7/1/2010 thru 6/30/2011</p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>
<p>CONTRACT:</p>	<p>Contract length:</p> <p>3 months (automatically renewable from 10/1/2007 through 6/31/2011, as provided below) Offer open 10/1/2007 and service available thru 9/31/2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

STANDARD SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Standard Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a three (3) month term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Standard Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract
- B. the existence and operation of an automatic renewal provision provided in the contract.



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Cheryl Patton
Contact Name Cheryl Patton
SSN/Tax ID _____

Service Address 408 4th St N
Home Phone Number _____

402460

Mailing Address 408 4th St N
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Cheryl Patton 8/31/07
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0598097-4		408 4th St N

Optional Customer Service Contract



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p>	<p>Monthly usage: <u>250 kWh</u> <u>500 kWh</u> <u>1000 kWh</u> <u>2000 kWh</u> No usage variation applies</p> <p>Effective price - Supply: \$0.0472090 7/1/2007 thru 6/30/2008 \$0.0508300 7/1/2008 thru 12/31/2008 \$0.0513400 1/1/2009 thru 6/30/2009 \$0.0518500 7/1/2009 thru 6/30/2010 \$0.0523700 7/1/2010 thru 6/30/2011</p> <p><i>CP 8/31/07</i></p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>
<p>CONTRACT:</p>	<p>Contract length: 4 years 10/1/2007-6/30//2011</p>
<p>QUESTIONS?</p>	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Cheryl Patton
Contact Name Cheryl Patton
SSN/Tax ID _____

Service Address 408 4th St N
Home Phone Number _____

Mailing Address 408 4th St N
City, State, ZIP Great Falls, MT 59401

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Cheryl Patton 8/29/2005
Owner Signature **Date**

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0598097-4		408 4th St N



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: William M Ryan
 Contact Name: William M Ryan
 SSN/Tax ID: 516 72 9399

Service Address: 8-18 Ave So
 Phone Number: 452 0309

Mailing Address: 8-18 Ave So
 City, State, ZIP: Great Falls MT, 59405

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

W Ryan
Owner Signature

Sept 28-07
Date

Current Supplier NWE Account # 3775848 Meter # EG85869969 Meter Address 8-18 Ave So GF. MT.


Northwestern Energy



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>											
<p>PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.</p> 	<p>Monthly usage: <u>250 kWh</u> <u>500 kWh</u> <u>1000 kWh</u> <u>2000 kWh</u> No usage variation applies</p> <p>Effective price - Supply:</p> <table border="0"> <tr><td>\$0.0472090</td><td>7/1/2007 thru 6/30/2008</td></tr> <tr><td>\$0.0508300</td><td>7/1/2008 thru 12/31/2008</td></tr> <tr><td>\$0.0513400</td><td>1/1/2009 thru 6/30/2009</td></tr> <tr><td>\$0.0518500</td><td>7/1/2009 thru 6/30/2010</td></tr> <tr><td>\$0.0523700</td><td>7/1/2010 thru 6/30/2011</td></tr> </table> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>	\$0.0472090	7/1/2007 thru 6/30/2008	\$0.0508300	7/1/2008 thru 12/31/2008	\$0.0513400	1/1/2009 thru 6/30/2009	\$0.0518500	7/1/2009 thru 6/30/2010	\$0.0523700	7/1/2010 thru 6/30/2011
\$0.0472090	7/1/2007 thru 6/30/2008										
\$0.0508300	7/1/2008 thru 12/31/2008										
\$0.0513400	1/1/2009 thru 6/30/2009										
\$0.0518500	7/1/2009 thru 6/30/2010										
\$0.0523700	7/1/2010 thru 6/30/2011										
CONTRACT:	<p>Contract length:</p> <p>4 years 10/1/2007-6/30/2011</p>										
QUESTIONS?	Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday										

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before Oct 1 07 you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing Oct 1 07, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

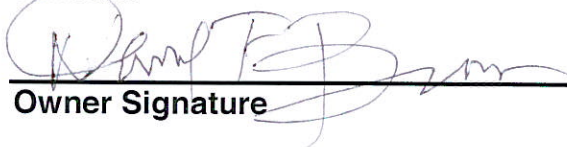
Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Source Giant Springs
Contact Name Brown, David
SSN/Tax ID _____

Service Address 5401 18th Ave N
Phone Number _____

Mailing Address PO Box 2996
City, State, ZIP Great Falls, MT 59403

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.



9/13/2007

Owner Signature

Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0362403-8		5401 18th Ave N
Northwestern Energy	0626537-8		5401 18th Ave N
Northwestern Energy	0362415-2		4600 Giant Springs Rd

Optional Service Contracts

Source Giant Springs®, Inc.

September 13, 2007

NorthWestern Energy Account Numbers

0362403-8	Source Giant Springs®, Inc. 5401 18 th Avenue North Great Falls, MT 59405	past 12 month average = 9615 kwh/month
0362415-2	Source Giant Springs®, Inc 4600 Giant Springs Road Great Falls, MT 59405	past 12 month average = 571 kwh/month
0626531-8	Source Giant Springs®, Inc. 5401 18 th Avenue North Great Falls, MT 59405	past 12 month average = 25 kwh/month



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: John Stephenson-Love
Contact Name John Stephenson-Love
SSN/Tax ID _____

Service Address 300 40th Ave S #29
Home Phone Number _____

Mailing Address 300 40th Ave S #29
City, State, ZIP Great Falls, MT 59405

519040

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

John Stephenson-Love 9/13/07
Owner Signature **Date**

Northwestern Energy 0668207-4 300 40th Ave S #29
Current Supplier **Account #** **Meter #** **Meter Address**

Optional Customer Service Contract Attached



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.	<p>Monthly usage: 250 kWh 500 kWh 1000 kWh 2000 kWh No usage variation applies</p> <p>Effective price - Supply: \$0.0472090 7/1/2007 thru 6/30/2008 \$0.0508300 7/1/2008 thru 12/31/2008 \$0.0513400 1/1/2009 thru 6/30/2009 \$0.0518500 7/1/2009 thru 6/30/2010 \$0.0523700 7/1/2010 thru 6/30/2011</p> <p>Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF</p> <p>Effective price – Administrative Fee 3% of the Effective Price - Supply</p>
CONTRACT:	<p>Contract length:</p> <p>4 years 10/1/2007-6/30//2011</p>
QUESTIONS?	<p>Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday</p>

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before _____, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing _____, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

ECP will provide 60 days notice prior to the expiration date of this Optional Service Contract of either:

- A. the need to affirmatively renew service from ECP at the end of the contract
- B. the existence and operation of an automatic renewal provision provided in the contract.



Electric City Power

A Service of the City of Great Falls

LETTER OF AUTHORIZATION TO CHANGE ELECTRICITY SUPPLIER

Pursuant to ARM 38.5.6002, ECP is required to obtain your written authorization before becoming your electricity supplier. Please review the terms of the contract and sign this letter before sending it to ECP.

Name on Account: Robert Walker
Contact Name Robert Walker
SSN/Tax ID 517-62-8893

Service Address 60 Stene Rd
Home Phone Number 4067962-9098

Mailing Address 60 Stene Rd-Box 57
City, State, ZIP Joliet, MT 59041

#525980

I, the owner of the above listed property, do hereby authorize Electric City Power of Great Falls to initiate the change in my choice of electricity supplier. I designate Electric City Power to act as my agent for the supplier change. I understand that by authorizing a change, I authorize access by Electric City Power to my usage and account information. I acknowledge receipt of Electric City Powers' Service Contract and agree to the terms and conditions of said contract.

Robert P. Walker

9/4/07

Owner Signature

Date

<u>Current Supplier</u>	<u>Account #</u>	<u>Meter #</u>	<u>Meter Address</u>
Northwestern Energy	0997015-3	ED53431435	60 Stene Rd



Electric City Power Incorporated

A Service of the City of Great Falls

OPTIONAL CUSTOMER SERVICE CONTRACT

<u>ELECTRICITY SUPPLY INFORMATION</u>	
PRICE: Effective price (cents per kilowatt-hour) Price does not include distribution, CTC-QF, USBC or any other charges.	Monthly usage: <u>250 kWh</u> <u>500 kWh</u> <u>1000 kWh</u> <u>2000 kWh</u> No usage variation applies Effective price - Supply: \$0.0472090 10/1/2007 thru 6/30/2008 \$0.0508300 7/1/2008 thru 12/31/2008 \$0.0513400 1/1/2009 thru 6/30/2009 \$0.0518500 7/1/2009 thru 6/30/2010 \$0.0523700 7/1/2010 thru 6/30/2011 Effective price - Transmission: \$.007402 thru 3/30/2008 Recalculated each March in accordance with Title 5, Chapter 20, OCCGF Effective price – Administrative Fee 3% of the Effective Price - Supply
CONTRACT:	Contract length: 4 years 10/1/2007-6/30/2011
QUESTIONS?	Call 406-727-7660 between the hours of 8 AM and 5 PM, Monday through Friday

SERVICE CONTRACT

By signing the attached Letter of Authorization and returning it to Electric City Power, Inc (ECP) on or before 9/4/07, you have entered into an agreement (Optional Service Contract) under which ECP will provide electricity supply and transmission services to the requested property or properties for a five (5) year term commencing 10/1/07, and you agree to pay ECP for those services during that same term as stated above.

The transmission rate is currently \$7.402/mWh and is adjusted annually each March to reflect the previous twelve month rate as paid to ECP's electric supplier.

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Mailing Address 60 Stene Rd-Box 57
City, State, ZIP Joliet, MT 59041

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9-12-05

Owner Signature

Date

Current Supplier	Account #	Meter #	Meter Address
Northwestern Energy	0997015-3	ED53431435	60 Stene Rd