

# FLORIDA GAS TRANSMISSION COMPANY, LLC

(See instructions below for completing form)

| Request for Imbalance Trade |                          |                          |      |                           |                |
|-----------------------------|--------------------------|--------------------------|------|---------------------------|----------------|
| Required Data Fields        | Initiating Trader Data   | Confirming Trader Data   |      |                           |                |
| Company Name:               |                          |                          |      |                           |                |
| D-U-N-S Number:             |                          |                          |      |                           |                |
| Contact Name:               |                          |                          |      |                           |                |
| Contact Phone Number:       |                          |                          |      |                           |                |
| Email Address:              |                          |                          |      |                           |                |
| Fax Number:                 |                          |                          |      |                           |                |
| Contract Holder:            |                          |                          |      |                           |                |
| D-U-N-S Number:             |                          |                          |      |                           |                |
| Imbalance Period:           |                          |                          |      |                           |                |
| Imbalance Type              | Imbalance Posting Number | Trade Quantity Requested | SFTS | Imbalance Trade Direction |                |
|                             |                          |                          |      | To Init Trdr              | From Init Trdr |
|                             |                          |                          |      |                           |                |
|                             |                          |                          |      |                           |                |
|                             |                          |                          |      |                           |                |
| Date:                       |                          | Signature:               |      |                           |                |

**Imbalance Trade Direction:**

TO - The quantity is being traded to the initiating trader from the confirming trader.

FROM - The quantity is being traded from the initiating trader to the confirming trader.

| Imbalance Trade Confirmation |   |
|------------------------------|---|
| Imbalance Trade Response:    | Accept <input type="checkbox"/> Reject <input type="checkbox"/> |
| Company Name:                |   |
| D-U-N-S Number:              |   |
| Contact Name:                |   |
| Date:                        | Signature:  |

| Imbalance Trade Notification        |                          |                |                           |                |
|-------------------------------------|--------------------------|----------------|---------------------------|----------------|
| Statement Date/Time:                | Trade Quantity Requested | Trade Quantity | Imbalance Trade Direction |                |
|                                     |                          |                | To Init Trdr              | From Init Trdr |
|                                     |                          |                |                           |                |
| Contact Name: <b>Galen Coon</b>     |                          |                |                           |                |
| Phone Number: <b>(713) 989-2086</b> |                          |                |                           |                |
| Fax Number: <b>(713) 989-1150</b>   |                          |                |                           |                |
| Date:                               |                          | Signature:     |                           |                |

## **Instructions for completing the this form:**

### **Request for Imbalance Trade**

The initiating trader or the person who wants to trade their imbalance position fills in this portion of the form. The data should include the information pertaining to their entity as well as the confirming parties information. Once the information is filled in, the initiating trader dates, signs, and faxes the form to the confirming trader.

### **Imbalance Trade Confirmation**

After reviewing the information pertaining to the trade, the confirming trader either accepts or rejects the trade, dates, signs and faxes the form to FGT as instructed on form.

### **Imbalance Trade Notification**

FGT will review the imbalance trade request, authorize the trade and fax back to the initiating and confirming traders a copy of the form for their records.

Once all trades have been finalized for the imbalance trading period, FGT will continue to send the Imbalance Trading Report by Customer. (Formally known as Legal Entity Book-Out Report)

## **Instructions for sending completed form.**

1. Print form and complete document or complete form on-line then print.
2. Take hard copy and complete Date and Signature Fields
3. Fax to appropriate party for further completion and authorization.