The purpose of the Comprehensive Energy Assistance Program ("CEAP") funded from the Low-Income Home Energy Assistance Program ("LIHEAP") grant is to maintain an energy supply to heat and cool the residences of eligible low-income clients.

The Energy Services provider, (or "Vendor,") agrees to honor the purpose of the CEAP grant and to accept pledges of payment from CEAP agencies only for certified customers to whom Vendor continues to provide energy services. The Energy Assistance Provider, (or "Agency",) agrees to make payments only for eligible low-income clients.

This vendor agreement is by and between:
Webb County, A political Subdivision of the State of Texas for the Community Action Agency
Energy Assistance Provider (Agency)
Tara Energy
(Vendor)
Vendor and Agency agree to assist customers in the following counties: Webb County
This agreement shall be effective from the 1st day of Jan 2020 for a period not to exceed two years from the effective date. Either party may terminate this agreement by written notice. Such written notice of termination shall not affect any obligation by either party incurred prior to the receipt of such notice. Notice shall be sent via certified mail with return receipt requested.
Tara Energy
(Vendor Name)
PO Box 301438 Dallas Texas 75303-1401
(Vendor Mailing Address)
Webb County c/o Webb County Community Action Agency
(Agency Name)
520 Reynolds St 2nd Floor, Laredo Texas 78040
(Agency Mailing Address)

The Vendor named above represents and warrants that it will apply any payments received from Agency to the account of the customer that the Agency has determined to be eligible under the CEAP guidelines and such is a "Certified Customer".

- Extend the CEAP applicant's energy service for up to five business days while the Agency determines whether the CEAP applicant is eligible pursuant to the CEAP guidelines.
- Upon accepting pledge from Agency for Certified Customer, continue or restore energy service to Certified Customer with no increases in charges, service charges or other charges affecting the total cost of the bill, except as allowed by the stated tariff cost registered with the Public Utility Commission "PUC" and/or Texas Railroad Commission.
- In the event the full past due balance is not paid by the Agency, the Certified Customer must pay the remaining balance on or before the disconnect date stated in the customer's Disconnect Notice required by PUC regulations in order to avoid disconnection or be eligible for reconnection. Nothing in this agreement requires the Vendor to reconnect the customer upon receipt of a pledge that does not cover the full past due balance or if the customer has already been disconnected by the time the pledge is received by the Vendor.
- Invoice the Certified Customer in accordance with Vendor's normal billing practices.
- Upon verbal or written request from Agency, provide at no cost to the Agency the Certified Customer's billing and usage history for previous twelve months, or available history plus monthly estimates if less than twelve months of billing history and usage is available. Vendor will transmit such billing history via electronic mail or facsimile as soon as possible, but no later than forty-eight hours following the request.
- Work with Agency and Certified Customer to explore the feasibility of offering flexible payment arrangements that may include, without limitation, waiving security deposits, reconnect fees, application fees, and all other fees whenever possible.
- Not discriminate against Certified Customer in price or services, including the availability
 of deferred payment plans, level or average payment plans, discount, budget, advance
 payment or other credit plans.
- Not refuse to provide energy service or otherwise discriminate in the marketing and provision of energy service to any Certified Customer because of race, creed, color, national origin, ancestry, sex, marital status, lawful source of income, level of income, disability, financial status, location of customer in an economically distressed geographic area, or qualification for low-income or energy-efficiency services.

- Allow Agency forty-five days from the date of the pledge to forward payment to the Vendor. Vendor agrees not to consider the portion of the Certified Customer's account to be paid by the Agency delinquent if said payment is received within the above mentioned forty-five day period and Vendor is provided with a verbal or signed pledge from the Agency within forty-five days of identifying a Certified Customer.
- Not interrupt service if Certified Customer is eligible under PUC regulations, or other state agency regulations (as applicable), and enters into an agreement with the Vendor concerning how the Certified Customer will pay the balance owed Vendor and the Certified Customer is meeting the obligation under such agreement.
- If the Agency has paid for an initial deposit or similar refundable instrument, upon the termination of service to the Certified Customer, the Vendor shall return funds including interest (after any balance owed) to the Agency in accordance with PUC regulations or other state agency regulations (as applicable).

- Obtain written permission for Agency to request and have access to customer information, including confidential or personal account information, credit and payment history, from customers seeking Agency's assistance. Social Security numbers are not required for the CEAP program and may not be disclosed to Agency.
- Provide to Vendor, at Vendor's request, customer's written permission for Agency's access to customer information as stated above.
- Not provide pledges on behalf of a Certified Customer to Vendor without having adequate funds to pay such pledge.
- Pay pledges within forty-five days of making pledge to Vendor.
- Determine if a customer is a Certified Customer within five days of contacting Vendor.
- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.

Alicia Prvm	3-26-20
Authorized Vendor Signature	Date
Alicia Prum	AR Supervisor
Typed Name of Authorized Signature	Title
713-881-8582	
Vendor (Area Code) Telephone Number	
Dledgerequesto justenergy Vendor Email Address	.COM
veridor Email Address	
Authorized Agency Signature	Date
Tano E Tijerina	Webb County Judge
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Telephone Number	

Form W-9

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do r	ot leave this line blank,													
	JUST ENERGY (U.S.) CORP.														
	2 Business name/disregarded entity name, if different from above														
~:	FULCRUM RETAIL HOLDINGS, LLC (SMLLC)/TARA ENERG	Y, LLC			£ 16 =	14	Evo	mati	200 /	endos	ann	V 00	he t-		
Print or type. Specific Instructions on page 3.	3 Check appropriate box for federal tax classification of the person whose name following seven boxes.	is entered on line 1. Ch	e 4 Exemptions (codes apply only to certain entitles not individuals; see instructions on page 3)												
s on p	☐ Individual/sole proprietor or ☑ C Corporation ☐ S Corporation single-member LLC	Partnership	Partnership Trust/estate							Exempt payee code (if any) 5					
Print or type. c Instructions	Limited liability company, Enter the tax classification (C_C corporation, S_S	corporation, P=Partne	rship) ▶												
or t	Note: Check the appropriate box in the line above for the tax classification	of the single-member or	wner. Do	not c	heck	E	xemp	ption	from	FATO	A re	porti	ng		
inte								(if an	/} _		E	:			
E P	is disregarded from the owner should check the appropriate box for the tax	classification of its own	ier.	0. 0.											
acil	☐ Other (see instructions) ►					_				rentent	d cuts	de In	u _s ,		
βg	5 Address (number, street, and apt. or suite no) See instructions		Request	er's	name	and	add	iress	(opti	onal)					
See	5251 WESTHEIMER ROAD, SUITE 1000		1												
	6 City, state, and ZIP code														
	HOUSTON, TX 77056		<u> </u>			_									
	7 List account number(s) here (optional)														
Par	Taxpayer Identification Number (TIN)														
Enter	your TIN in the appropriate box. The TIN provided must match the name	given on line 1 to av	/oid	Soc	clal se	cur	ity n	umb	er						
backı	in withholding. For individuals, this is generally your social security number	per (SSN). However, 1	for a							_[T			
reside	ent alien, sole proprietor, or disregarded entity, see the instructions for Poss, it is your employer identification number (EIN). If you do not have a nu	art I, later. For other Imber, see How to go	et a				-					L	لــــــــــــــــــــــــــــــــــــــ		
TIN, I	ater.			or									_		
Note:	If the account is in more than one name, see the instructions for line 1,	Also see What Name	and	Em	ploye	110	entil	ICAU	on nu	umbe		_	=		
Numb	er To Give the Requester for guidelines on whose number to enter.			9	8	-	0	4	0	4	7 5	; :	3		
STATE OF THE PARTY OF	SITE O LIGHT AND		-si		Ш				_1						
Par	Certification penalties of perjury, I certify that:														
1 The	number shown on this form is my correct taxnaver identification number	er (or I am waiting for	a numbe	er to	be is	ssue	ed to	o me); an	id					
2 1	- and authors to bookup withholding because: (a) I am exempt from back	ain withholding, or (t	ol I have i	nat t	oeen	not	illea	ו עם ו	ne II	ntem	al Re	ver	nue		
Sei	vice (IRS) that I am subject to backup withholding as a result of a failure longer subject to backup withholding; and	to report all interest	or divide	enas	, or (c	;) tn	ie ih	so na	เร กด	ounec	me	tna	t i am		
	n a U.S. citizen or other U.S. person (defined below); and														
4. The	FATCA code(s) entered on this form (if any) indicating that I am exempt	from FATCA reporti	ng is cor	rect.		l=1= -	-11-	L1			ما:لماء	a b			
was h	ication instructions. You must cross out item 2 above if you have been not ave failed to report all interest and dividends on your tax return. For real esta	ite transactions, item :	2 does no	ot ac	י געוסו	or r	ποπ	gage	: inte	rest	Jaio,				
	cities as abandosmost of cocured amondy, cancellation of debt, contribution	ns to an individual reli	rement a	rrand	oeme:	nt ti	HA).	, ano	qen	erally	, pay	mer	nts		
other	than interest and dividends, you are not required to sign the certification, bu	t you must provide yo	our correc	t TIP	V. Sec	e the	e ins	truci	ions	IOr P	art II	, lat	er.		
Sign	Signature of U.S. person		Date ►	J	anu	ary	3,	202	.0						
Ge	neral Instructions	• Form 1099-DIV (d	lividends	, inc	ludin	g th	ose	fron	n sto	ocks	or m	utua	al		
	on references are to the Internal Revenue Code unless otherwise	funds) • Form 1099-MISC	various	type	es of	ınco	ome	. priz	es.	awar	ds. c	r ar	oss		
notec	l.	proceeds)	(Lancas	.,,,								,			
relate	e developments. For the latest information about developments d to Form W-9 and its instructions, such as legislation enacted	 Form 1099-B (sto transact;ons by bro 		ıtual	fund	sal	es a	and c	erta	in oll	ier				
after	they were published, go to www.irs.gov/FormW9.	 Form 1099-S (pro 													
Pur	pose of Form	 Form 1099-K (me 													
inforr	dividual or entity (Form W-9 requester, who is required to file an nation return with the IRS must obtain your correct taxpayer	 Form 1098 (home 1098-T (tuition) 	mortgag	ge ir	iteres	il), 1	1098	3-E (stud	ent lo	an i	nter	est),		
ident	ification number (TIN) which may be your social security number	• Form 1099-C (car		(20)						•					
taxpa), individual taxpayer ident;fication number (ITIN), adopt;on yer ident;fication number (ATIN), or employer identification number	• Form 1099-A (acc													
(EIN)	to report on an information return the amount paid to you, or other intreportable on an information return. Examples of information	Use Form W-9 of alien), to provide yo	our corre	ct T	IN.										
return	ns include, but are not limited to, the following. m 1099-INT (Interest earned or paid)	If you do not retu be subject to back	ım Form up withho	W-9 aldir	to thig. Se	ne r	equi Vhal	ester t is b	witt ackı	h a Ti up wi	N, y Ihho	ldin	night 9.		
	3	later.													

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Tara Energy
(Vendor Name)
PO Box 301438 Dallas Texas 75303-1401
(Vendor Mailing Address)
Webb County c/o Webb County Community Action Agency
(Agency Name)
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(Agency Mailing Address)

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- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.

Alicia Prum	4-20-20
Authorized Vendor Signature	Date
Alicia Prum	AR Supervisor
Typed Name of Authorized Signature	Title
713-881-8550	
Vendor (Area Code) Telephone Number	
Pledie venuesto justes Vendor Email Address	nergy.com
Vendor Email Address	3 (
Authorized Agency Signature	Date
Tano E Tijerina	Webb County Judge
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Tolophone Number	

(Rev. October 2018) Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.lrs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do	not leave this line blank,										
	JUST ENERGY (U.S.) CORP.											
	2 Business name/disregarded entity name, if different from above											
2	FULCRUM RETAIL HOLDINGS, LLC (SMLLC)/TARA ENERG											
page 3.	Check appropriate box for federal tax classification of the person whose nam following seven boxes.	4 Exemptions (codes apply only to certain entitles not individuals; see instructions on page 3)										
e. ns on	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC	☐ Partnership	∐ Trust/	estate	Exempt	payee	:ode (il 2	iy)	5			
typ tio	Limited liability company, Enter the tax classification (C=C corporation, S=	S corporation, P. Partne	rship) ▶									
Print or type. Specific Instructions on page 3	Note: Check the appropriate box in the line above for the tax classification LLC if the LLC is classified as a single-member LLC that is disregarded from another LLC that is not d'sregarded from the owner for U.S. federal tax puis disregarded from the owner should check the appropriate box for the tax.	is										
ac.	☐ Other (see instructions) ▶		,			accounts		utside In	·Us)			
	5 Address (number, street, and apt. or suite no) See instructions		Requester	's name a	ind addr	ess (opt	ional)					
See	5251 WESTHEIMER ROAD, SUITE 1000											
	6 City, state, and ZIP code											
	HOUSTON, TX 77056					-	-					
	7 List account number(s) here (optional)											
Par	Taxpayer Identification Number (TIN)											
	your TIN in the appropriate box. The TIN provided must match the name	ne given on line 1 to av	oid S	ocial sec	urity nu	mber						
backu	to withholding. For individuals, this is generally your social security num	nber (SSN). However 1	for a	TT	7 7				$\overline{1}$			
reside	ent alien, sole proprietor, or disregarded entity, see the instructions for less, it is your employer identification number (EIN). If you do not have a r	Part I, later. For other	et a		-		-					
TIN, la		iomber, see non io gi	01						_			
Note:	If the account is in more than one name, see the instructions for line 1.	. Also see What Name	and E	mployer	identific	cation n	umber					
Numb	per To Give the Requester for guidelines on whose number to enter.			8 8	- 0	4 0	4 7	5	3			
					١	7 0	7 /					
Par												
	r penalties of perjury, I certify that:											
2. I ar Ser	a number shown on this form is my correct taxpayer identification number not subject to backup withholding because; (a) I am exempt from bactivice (IRS) that I am subject to backup withholding as a result of a failur longer subject to backup withholding; and	kup withholding, or (b) I have no	t been n	otified I	by the I	ntemal	Rever	nue It I am			
	n a U.S. citizen or other U.S. person (defined below); and											
	FATCA code(s) entered on this form (if any) indicating that I am exemp											
you h	Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all Interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.											
	than interest and dividends, you are not required to sign the certification, b	ons to an :ndividual reti	rement arra	apply. Fo Ingemen	t (IRA), a	and ger	for Par					
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Section noted Futur relate after Pur An inclinion identification.	than interest and dividends, you are not required to sign the certification, by Signature of U.S. person by The control instructions On references are to the Internal Revenue Code unless otherwise I. the developments. For the latest information about developments and to Form W-9 and its instructions, such as legislation enacted they were published, go to www.irs.gov/FormW9. The pose of Form	Form 1099-DIV (d funds) Form 1099-MISC proceeds) Form 1099-B (sto transact;ons by bro Form 1099-S (pro Form 1099-K (me Form 1098 (home	Date > ividends, in ;various ty ck or mutu kers) iceeds from rchant card mortgage	Janua Janua Janua ncluding pes of ir al fund s n real es d and thi interest	t (IRA), a the instruction of th	ructions 2020 from str prizes, ad certa nsactio y netwo	awards ain othe ns) ork trans	mutu , or g r sactio	ross ns)			

alien), to provide your correct TIN.

Use Form W-9 only if you are a U.S. person (including a resident

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

taxpayer identification number (ATIN), or employer identification number

(EIN), to report on an information return the amount paid to you, or other

amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

• Form 1099-INT (interest earned or paid)

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Just Energy
(Vendor Name)
PO Box 650518 Dallas Texas 75265-0518
(Vendor Mailing Address)
Webb County c/o Webb County Community Action Agency
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 payment or other credit plans.
- Not refuse to provide energy service or otherwise discriminate in the marketing and provision of energy service to any Certified Customer because of race, creed, color, national origin, ancestry, sex, marital status, lawful source of income, level of income, disability, financial status, location of customer in an economically distressed geographic area, or qualification for low-income or energy-efficiency services.

- Allow Agency forty-five days from the date of the pledge to forward payment to the Vendor. Vendor agrees not to consider the portion of the Certified Customer's account to be paid by the Agency delinquent if said payment is received within the above mentioned forty-five day period and Vendor is provided with a verbal or signed pledge from the Agency within forty-five days of identifying a Certified Customer.
- Not interrupt service if Certified Customer is eligible under PUC regulations, or other state agency regulations (as applicable), and enters into an agreement with the Vendor concerning how the Certified Customer will pay the balance owed Vendor and the Certified Customer is meeting the obligation under such agreement.
- If the Agency has paid for an initial deposit or similar refundable instrument, upon the
 termination of service to the Certified Customer, the Vendor shall return funds including
 interest (after any balance owed) to the Agency in accordance with PUC regulations or
 other state agency regulations (as applicable).

- Obtain written permission for Agency to request and have access to customer information, including confidential or personal account information, credit and payment history, from customers seeking Agency's assistance. Social Security numbers are not required for the CEAP program and may not be disclosed to Agency.
- Provide to Vendor, at Vendor's request, customer's written permission for Agency's access to customer information as stated above.
- Not provide pledges on behalf of a Certified Customer to Vendor without having adequate funds to pay such pledge.
- Pay pledges within forty-five days of making pledge to Vendor.
- Determine if a customer is a Certified Customer within five days of contacting Vendor.
- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.

Alicia Prum	3-26-20
Authorized Vendor Signature	Date
AliaaPrum	AR Supervisor
Typed Name of Authorized Signature	Title
713-881-8582	
Vendor (Area Code) Telephone Number	
Pledgerequest @ justenerge Vendor Email Address	1, COM
Veridor Email Address	1
Authorized Agency Signature	Date
Tano E Tijerina	Webb County Judge
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Telephone Number	

(Rev. October 2018) Department of the Treasury

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

merina nevertue sarvico															
	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.														
JUST ENERGY TEXAS I CORP. 2 Business name/disregarded entity name, if different from above															
က်	JUST ENERGY TEXAS LP 3 Check appropriate box for federal tax classification of the person whose name	is antered on line 1 -he	eck only o	ne of	the	4 Exp	mptions	(codes a	apply	only to					
page	Check appropriate box for federal fax classification of the person whose name following seven boxes. ———————————————————————————————————	is entered on ano 1. Cit		certain entitles, not individuals; see instructions on page 3):											
no si	☐ Individual/sole proprietor or ☑ C Corporation ☐ S Corporation single-member LLC	Partnership	ate	Exemp	pt payee	code (il a	3ny)	5							
yp tior	Limited liability company. Enter the tax classification (C=C corporation, S=S	corporation, P=Partner	ship) >		_										
or t	Note: Check the appropriate box in the line above for the tax classification of	of the single-member ov	wner. Do r	not ch	1eck	Exem	ption fro	m FATC		tlng					
Print or type. Specific Instructions on page	another LLC that is not disregarded from the owner for U.S. lederal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.						code (if any)								
BCi	☐ Other (see instructions) ▶		r-=				to accounts		Outside	Ne U.S ;					
g	5 Address (number, street, and apt. or suite no.) See Instructions.		Requeste	er's n	ame an	d ado	iress (op	tional)							
See	5251 WESTHEIMER ROAD, SUITE 1000														
0,	6 City, state, and ZIP code		}												
	HOUSTON, TX 77056														
	7 List account number(s) here (optional)														
The second second	SOCIALIS - POWER B B I														
Pa	Taxpayer Identification Number (TIN)	giung en line 1 to	nid T	Soci	al seci	irity n	umber								
back	your TIN in the appropriate box. The TIN provided must match the name up withholding. For individuals, this is generally your social security numb	er (SSN). However, f	fora [1	1]		1	1	一一					
racid	ontalien, sole proprietor, or disregarded entity, see the instructions for Pa	art I, later. For other	1			-		-							
entitle	es, it is your employer identification number (EIN). If you do not have a nu	mber, see How to ge	era L	or				J _	احسا						
TIN, I	ater. If the account is in more than one name, see the instructions for line 1. A	Also see What Name			loyeri	denti	fication	number							
Note	per To Give the Requester for guidelines on whose number to enter.	and dec ivina ivamo	ן יייי	T				П	TI	_					
	-			9	8 -	0	4 8	9 1	3	5					
Par	Certification														
Unde	r penalties of perjury, I certify that:														
1 Th	number shown on this form is my correct taxpayer identification number	er (or I am waiting for	a numbe	r to	be issi	ued to	o me); a	nd							
2. I a Se	n not subject to backup withholding because: (a) I am exempt from back rvice (IRS) that I am subject to backup withholding as a result of a failure longer subject to backup withholding; and	un withholding, or (b	l have n	ot b	een no	titiec	d by the	Interna	me th	at I am					
3. l a	n a U.S. citizen or other U.S. person (defined below); and														
4. Th	e FATCA code(s) entered on this form (if any) indicating that I am exempt	from FATCA reporting	ng is corr	ect.											
Certi you h	fication instructions. You must cross out item 2 above if you have been not ave failed to report all interest and dividends on your tax return. For real estage items are abandon monthly cancellating of debt, contribution	fied by the IRS that yet te transactions, item and to an individual reti	ou are cui 2 does no rement ar	rrentl t app	oly. Foi ement	(IRA)	igage in , and ge	nerally,	aio, paym	ents					
other	than interest and dividends, you are not required to sign the certification, but	t you must provide yo	ur correct	I IIN.	. See 1	ne ins	Struction	s for Pa	irt II, la	ater.					
Sign	B U.S. person ► 2 / /		Date►				2020								
	neral Instructions	 Form 1099-DIV (d funds) 	ividends,	incl	uding	hose	from s	tocks o	r muti	lau					
note		 Form 1099-MISC proceeds) 	(various l	type	s of inc	come	, prizes	, award	s, or g	gross					
relati	re developments. For the latest information about developments ed to Form W-9 and its instructions, such as legislation enacted	Form 1099-B (sto transactions by bro	kers)						er						
after	they were published, go to www.irs.gov/FormW9.	 Form 1099-\$ (pro 													
Pul	pose of Form	 Form 1099-K (me 	rchant ca	ard a	nd thir	d par	rty netw	ork tran	nsacti	ons)					
An in	dividual or entity (Form W-9 requester) who is required to file an mation return with the IRS must obtain your correct taxpayer	 Form 1098 (home 1098-T (tuition) 	mortgag	je int	erest),	1098	B-E (stu	dent lo	an inte	erest).					
iden	ification number (TIN) which may be your social security number	• Form 1099-C (car	nceled de	ebt)											
ISSN), individual taxpayer identification number (ITIN), adoption ayer identification number (ATIN), or employer identification number	• Form 1099-A (acq	u;sition o	r aba	andoni	nent	of secu	red pro	perty)						
(EIN)	to report on an information return the amount paid to you, or other untreportable on an information return. Examples of information	Use Form W-9 or al;en), to provide yo				perso	on (incl	uding a	reside	ent					
	returns include, but are not limited to, the following. If you do not return Form V					requ	ester w	ith a Til	V, you	might					

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding,

• Form 1099-INT (interest earned or paid)

The purpose of the Comprehensive Energy Assistance Program ("CEAP") funded from the Low-Income Home Energy Assistance Program ("LIHEAP") grant is to maintain an energy supply to heat and cool the residences of eligible low-income clients.

The Energy Services provider, (or "Vendor,") agrees to honor the purpose of the CEAP grant and to accept pledges of payment from CEAP agencies only for certified customers to whom Vendor continues to provide energy services. The Energy Assistance Provider, (or "Agency",) agrees to make payments only for eligible low-income clients.

agrees to make payments only for eligible low-income clients.
This vendor agreement is by and between:
Webb County, A political Subdivision of the State of Texas for the Community Action Agency and
Energy Assistance Provider (Agency)
Just Energy
(Vendor)
Vendor and Agency agree to assist customers in the following counties: Webb County
This agreement shall be effective from the 1st day of Jan 2020 for a period not to exceed two years from the effective date. Either party may terminate this agreement by written notice. Such written notice of termination shall not affect any obligation by either party incurred prior to the receipt of such notice. Notice shall be sent via certified mail with return receipt requested.
Just Energy (Van der Nerge)
(Vendor Name)
PO Box 650518 Dallas Texas 75265-0518
(Vendor Mailing Address)
Webb County c/o Webb County Community Action Agency
(Agency Name)
520 Reynolds St 2nd Floor Laredo Texas 78040
(Agency Mailing Address)

The Vendor named above represents and warrants that it will apply any payments received from Agency to the account of the customer that the Agency has determined to be eligible under the CEAP guidelines and such is a "Certified Customer".

- Extend the CEAP applicant's energy service for up to five business days while the Agency determines whether the CEAP applicant is eligible pursuant to the CEAP guidelines.
- Upon accepting pledge from Agency for Certified Customer, continue or restore energy service to Certified Customer with no increases in charges, service charges or other charges affecting the total cost of the bill, except as allowed by the stated tariff cost registered with the Public Utility Commission "PUC" and/or Texas Railroad Commission.
- In the event the full past due balance is not paid by the Agency, the Certified Customer must pay the remaining balance on or before the disconnect date stated in the customer's Disconnect Notice required by PUC regulations in order to avoid disconnection or be eligible for reconnection. Nothing in this agreement requires the Vendor to reconnect the customer upon receipt of a pledge that does not cover the full past due balance or if the customer has already been disconnected by the time the pledge is received by the Vendor.
- Invoice the Certified Customer in accordance with Vendor's normal billing practices.
- Upon verbal or written request from Agency, provide at no cost to the Agency the Certified Customer's billing and usage history for previous twelve months, or available history plus monthly estimates if less than twelve months of billing history and usage is available. Vendor will transmit such billing history via electronic mail or facsimile as soon as possible, but no later than forty-eight hours following the request.
- Work with Agency and Certified Customer to explore the feasibility of offering flexible payment arrangements that may include, without limitation, waiving security deposits, reconnect fees, application fees, and all other fees whenever possible.
- Not discriminate against Certified Customer in price or services, including the availability
 of deferred payment plans, level or average payment plans, discount, budget, advance
 payment or other credit plans.
- Not refuse to provide energy service or otherwise discriminate in the marketing and provision of energy service to any Certified Customer because of race, creed, color, national origin, ancestry, sex, marital status, lawful source of income, level of income, disability, financial status, location of customer in an economically distressed geographic area, or qualification for low-income or energy-efficiency services.

- Allow Agency forty-five days from the date of the pledge to forward payment to the Vendor. Vendor agrees not to consider the portion of the Certified Customer's account to be paid by the Agency delinquent if said payment is received within the above mentioned forty-five day period and Vendor is provided with a verbal or signed pledge from the Agency within forty-five days of identifying a Certified Customer.
- Not interrupt service if Certified Customer is eligible under PUC regulations, or other state agency regulations (as applicable), and enters into an agreement with the Vendor concerning how the Certified Customer will pay the balance owed Vendor and the Certified Customer is meeting the obligation under such agreement.
- If the Agency has paid for an initial deposit or similar refundable instrument, upon the termination of service to the Certified Customer, the Vendor shall return funds including interest (after any balance owed) to the Agency in accordance with PUC regulations or other state agency regulations (as applicable).

- Obtain written permission for Agency to request and have access to customer information, including confidential or personal account information, credit and payment history, from customers seeking Agency's assistance. Social Security numbers are not required for the CEAP program and may not be disclosed to Agency.
- Provide to Vendor, at Vendor's request, customer's written permission for Agency's access to customer information as stated above.
- Not provide pledges on behalf of a Certified Customer to Vendor without having adequate funds to pay such pledge.
- Pay pledges within forty-five days of making pledge to Vendor.
- Determine if a customer is a Certified Customer within five days of contacting Vendor.
- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.

AlicaPrim	4-20-20
Authorized Vendor Signature	Date
Alicia Prum	ARSupervisor
Typed Name of Authorized Signature	Title
713-881-8550	
Vendor (Area Code) Telephone Number	*
<u>Pledgereguest@justenergy.co</u> Vendor Email Address	<u> </u>
veridor Email Address	
Authorized Agency Signature	Date
Tano E Tijerina	Webb County Judge
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Telephone Number	

Form (Rev. October 2018)

(Rev. October 2018)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

internal	Revenue Service Go to www.irs.gov/rommw9 for insu		at milom	idu	UII.										
	1 Name (as shown on your income lax return). Name is required on this line; do	not leave this line blank.													
JUST ENERGY TEXAS I CORP.															
	2 Business name/disregarded entity name, if different from above														
	JUST ENERGY TEXAS LP					4			laad		00/				
page 3.	3 Check appropriate box for federal lax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.							4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):							
Print or type. Specific Instructions on page	☐ Individual/sole proprietor or ☐ C Corporation ☐ S Corporation single-member LLC	Partnership	Exen	ıpt pa	yee o	ode (if	any)_	5							
tioit	Limited liability company. Enter the tax classification (C=C corporation, S=:	S corporation, P=Partner	rship) ▶												
P	Note: Check the appropriate box in the line above for the tax classification	of the single-member ov	wner. Do i	not c	check	Exen	nption	fron	FATC	A repo	ortlng				
Print or type. Ic Instructions	LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.							iy) .		E					
ecil	☐ Other (see Instructions) ►	- circuit								d outside	ine U.S	1_			
Sp	5 Address (number, street, and apt. or suite no.) See instructions.		Request	er's	name a	name and address (optional)									
See	5251 WESTHEIMER ROAD, SUITE 1000														
	6 City, state, and ZIP code		}												
	HOUSTON, TX 77056														
	7 List account number(s) here (optional)				0										
NE DIEC	Townsyer Identification Number (TIM)														
REI	Taxpayer Identification Number (TIN) your TIN in the appropriate box. The TIN provided must match the name	e given on line 1 to av	oid I	Soc	cial se	curity	numb	ег							
backi	in withholding. For individuals, this is generally your social security num	ber (SSN), However, f	for a		П	٦				T	П				
reside	int alien, sole proprietor, or disregarded entity, see the instructions for P is, it is your employer identification number (EIN). If you do not have a ni	art I, later. For other	et a			-			-						
TIN, I		umber, see non to ge		or											
Note: If the account is in more than one name, see the instructions for line 1. Also see What Name and Employe				ployer	yer identification number										
Numb	er To Give the Requester for guidelines on whose number to enter.		*	9	8	- 0	4	8	9 1	3	5				
				3	٦			Ŭ		L					
Par															
	penalties of perjury, I certify that:	ar lar Lam westing for	a numba		, ho ic	cuod	to me	J. 21	hd						
2 1 25	a number shown on this form is my correct taxpayer identification numb n not subject to backup withholding because; (a) I am exempt from bac	kun withholding, or (b	I have r	tor b	been r	otifie	d by	the l	nterna	al Rev	enue				
Sei	vice (IRS) that I am subject to backup withholding as a result of a failure longer subject to backup withholding; and	e to report all interest	or divide	nds	, or (c)	the I	RS h	as n	otified	me t	hat I a	am			
	n a U.S. citizen or other U.S. person (defined below); and														
4. The	FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reporting	ng is corr	rect.	•										
Certif	ication instructions. You must cross out item 2 above if you have been no	t fied by the IRS that ye	ou are cu	rren	tly sub	ject t	o bac	kup	withho	lding	beca	use			
acmii	ave failed to report all interest and dividends on your tax retum. For real est sition or abandonment of secured property, cancellation of debt, contribution	ns to an individual reti	rement ar	mand	gemer	it (IHA), and	i ger	ierally,	payn	ents				
other	than interest and dividends, you are not required to sign the certification, but	ut you must provide yo	ur correct	t TIN	V. See	the in	struc	tions	for P	art II, I	ater.				
Sign					Janua	ary 3	, 20	20							
Here			Date >									_			
	neral Instructions	 Form 1099-DIV (d funds) 										_			
notec		 Form 1099-MISC proceeds) 									gross	5			
relate	e developments. For the latest information about developments d to Form W-9 and its instructions, such as legislation enacted	 Form 1099-B (stotransactions by bro 		tual	fund	sales	and (certa	in oth	er					
	they were published, go to www.irs.gov/FormW9.	2 10 10 1 1 100	(proceeds from real estate transactions)												
Pur	pose of Form	 Form 1099-K (me 													
inform	dividual or entity (Form W-9 requester) who is required to file an nation return with the IRS must obtain your correct taxpayer	 Form 1098 (home 1098-T (tuition) 	mortgag	je in	iterest), 109)8-E (stuc	ent lo	an int	erest),			
identi	fication number (TIN) which may be your social security number , individual taxpayer identification number (ITIN), adoption	 Form 1099-C (car 									N (/				
taxpa	yer identification number (ATIN), or employer identification number	• Form 1099-A (acq													
(EIN),	to report on an information return the amount paid to you, or other int reportable on an information return. Examples of information	Use Form W-9 or al;en), to provide yo				. pers	on (ii	nclu	aing a	resid	ent				
	is include, but are not limited to, the following.	If you do not retu				e requ	ieste	r wit	h a Tl	V, yo	ı mig	ht			
	m 1099-INT (interest earned or paid)	be subject to backu later													

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The purpose of the Comprehensive Energy Assistance Program ("CEAP") funded from the Low-Income Home Energy Assistance Program ("LIHEAP") grant is to maintain an energy supply to heat and cool the residences of eligible low-income clients.

The Energy Services provider, (or "Vendor,") agrees to honor the purpose of the CEAP grant and to accept pledges of payment from CEAP agencies only for certified customers to whom Vendor continues to provide energy services. The Energy Assistance Provider, (or "Agency",) agrees to make payments only for eligible low-income clients.

This vendor agreement is by and between:
Webb County, A political subdivision of the State of Texas for the Community Action Agency and
Energy Assistance Provider (Agency)
OUR ENERGY LLC
(Vendor)
Vendor and Agency agree to assist customers in the following counties: WEBB COUNTY
This agreement shall be effective from the <u>1ST</u> day of <u>JAN 2020</u> for a period not to exceed two years from the effective date. Either party may terminate this agreement by written notice. Such written notice of termination shall not affect any obligation by either party incurred prior to the receipt of such notice. Notice shall be sent via certified mail with return receipt requested. OUR ENERGY LLC
(Vendor Name)
17154 BUTTE CREEK RD STE 250 HOUSTON TEXAS 77090
(Vendor Mailing Address)
WEBB COUNTY COMMUNITY ACTION AGENCY c/o WEBB COUNTY CAA
(Agency Name)
520 REYNOLDS ST 2ND FLOOR LAREDO TEXAS 78040
(Agency Mailing Address)

The Vendor named above represents and warrants that it will apply any payments received from Agency to the account of the customer that the Agency has determined to be eligible under the CEAP guidelines and such is a "Certified Customer".

- Extend the CEAP applicant's energy service for up to five business days while the Agency determines whether the CEAP applicant is eligible pursuant to the CEAP guidelines.
- Upon accepting pledge from Agency for Certified Customer, continue or restore energy service to Certified Customer with no increases in charges, service charges or other charges affecting the total cost of the bill, except as allowed by the stated tariff cost registered with the Public Utility Commission "PUC" and/or Texas Railroad Commission.
- In the event the full past due balance is not paid by the Agency, the Certified Customer must pay the remaining balance on or before the disconnect date stated in the customer's Disconnect Notice required by PUC regulations in order to avoid disconnection or be eligible for reconnection. Nothing in this agreement requires the Vendor to reconnect the customer upon receipt of a pledge that does not cover the full past due balance or if the customer has already been disconnected by the time the pledge is received by the Vendor.
- Invoice the Certified Customer in accordance with Vendor's normal billing practices.
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- Work with Agency and Certified Customer to explore the feasibility of offering flexible payment arrangements that may include, without limitation, waiving security deposits, reconnect fees, application fees, and all other fees whenever possible.
- Not discriminate against Certified Customer in price or services, including the availability
 of deferred payment plans, level or average payment plans, discount, budget, advance
 payment or other credit plans.
- Not refuse to provide energy service or otherwise discriminate in the marketing and provision of energy service to any Certified Customer because of race, creed, color, national origin, ancestry, sex, marital status, lawful source of income, level of income, disability, financial status, location of customer in an economically distressed geographic area, or qualification for low-income or energy-efficiency services.

- Allow Agency forty-five days from the date of the pledge to forward payment to the Vendor. Vendor agrees not to consider the portion of the Certified Customer's account to be paid by the Agency delinquent if said payment is received within the above mentioned forty-five day period and Vendor is provided with a verbal or signed pledge from the Agency within forty-five days of identifying a Certified Customer.
- Not interrupt service if Certified Customer is eligible under PUC regulations, or other state agency regulations (as applicable), and enters into an agreement with the Vendor concerning how the Certified Customer will pay the balance owed Vendor and the Certified Customer is meeting the obligation under such agreement.
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- Obtain written permission for Agency to request and have access to customer information, including confidential or personal account information, credit and payment history, from customers seeking Agency's assistance. Social Security numbers are not required for the CEAP program and may not be disclosed to Agency.
- Provide to Vendor, at Vendor's request, customer's written permission for Agency's access to customer information as stated above.
- Not provide pledges on behalf of a Certified Customer to Vendor without having adequate funds to pay such pledge.
- Pay pledges within forty-five days of making pledge to Vendor.
- Determine if a customer is a Certified Customer within five days of contacting Vendor.
- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.



S - CC	4-23-2020
Authorized Vendor Signature	Date
5 Yed Alisha	VP financo
Typed Name of Authorized Signature	Title
281-552-8390	
Vendor (Area Code) Telephone Number	
Vendor Email Address	
Authorized Agency Signature	Date
TANO E TIJERINA	WEBB COUNTY JUDGE
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Telephone Number	

The purpose of the Comprehensive Energy Assistance Program ("CEAP") funded from the Low-Income Home Energy Assistance Program ("LIHEAP") grant is to maintain an energy supply to heat and cool the residences of eligible low-income clients.

The Energy Services provider, (or "Vendor,") agrees to honor the purpose of the CEAP grant and to accept pledges of payment from CEAP agencies only for certified customers to whom Vendor continues to provide energy services. The Energy Assistance Provider, (or "Agency",) agrees to make payments only for eligible low-income clients.

agrees to make payments only for ongular for inverse
This vendor agreement is by and between:
Nebb County, A political subdivision of the State of Texas for the Community Action Agency and
Energy Assistance Provider (Agency)
OUR ENERGY LLC
(Vendor)
Vendor and Agency agree to assist customers in the following counties: WEBB COUNTY
This agreement shall be effective from the <u>1ST</u> day of <u>JAN 2020</u> for a period not to exceed tw years from the effective date. Either party may terminate this agreement by written notice Such written notice of termination shall not affect any obligation by either party incurred prior the receipt of such notice. Notice shall be sent via certified mail with return receipt requested.
OUR ENERGY LLC
(Vendor Name)
17154 BUTTE CREEK RD STE 250 HOUSTON TEXAS 77090
(Vendor Mailing Address)
WEBB COUNTY COMMUNITY ACTION AGENCY c/o WEBB COUNTY CAA
(Agency Name)

LAREDO TEXAS 78040

520 REYNOLDS ST 2ND FLOOR

(Agency Mailing Address)

The Vendor named above represents and warrants that it will apply any payments received from Agency to the account of the customer that the Agency has determined to be eligible under the CEAP guidelines and such is a "Certified Customer".

- Extend the CEAP applicant's energy service for up to five business days while the Agency determines whether the CEAP applicant is eligible pursuant to the CEAP guidelines.
- Upon accepting pledge from Agency for Certified Customer, continue or restore energy service to Certified Customer with no increases in charges, service charges or other charges affecting the total cost of the bill, except as allowed by the stated tariff cost registered with the Public Utility Commission "PUC" and/or Texas Railroad Commission.
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- Upon verbal or written request from Agency, provide at no cost to the Agency the Certified Customer's billing and usage history for previous twelve months, or available history plus monthly estimates if less than twelve months of billing history and usage is available. Vendor will transmit such billing history via electronic mail or facsimile as soon as possible, but no later than forty-eight hours following the request.
- Work with Agency and Certified Customer to explore the feasibility of offering flexible payment arrangements that may include, without limitation, waiving security deposits, reconnect fees, application fees, and all other fees whenever possible.
- Not discriminate against Certified Customer in price or services, including the availability
 of deferred payment plans, level or average payment plans, discount, budget, advance
 payment or other credit plans.
- Not refuse to provide energy service or otherwise discriminate in the marketing and provision of energy service to any Certified Customer because of race, creed, color, national origin, ancestry, sex, marital status, lawful source of income, level of income, disability, financial status, location of customer in an economically distressed geographic area, or qualification for low-income or energy-efficiency services.

- Allow Agency forty-five days from the date of the pledge to forward payment to the Vendor. Vendor agrees not to consider the portion of the Certified Customer's account to be paid by the Agency delinquent if said payment is received within the above mentioned forty-five day period and Vendor is provided with a verbal or signed pledge from the Agency within forty-five days of identifying a Certified Customer.
- Not interrupt service if Certified Customer is eligible under PUC regulations, or other state agency regulations (as applicable), and enters into an agreement with the Vendor concerning how the Certified Customer will pay the balance owed Vendor and the Certified Customer is meeting the obligation under such agreement.
- If the Agency has paid for an initial deposit or similar refundable instrument, upon the
 termination of service to the Certified Customer, the Vendor shall return funds including
 interest (after any balance owed) to the Agency in accordance with PUC regulations or
 other state agency regulations (as applicable).

- Obtain written permission for Agency to request and have access to customer information, including confidential or personal account information, credit and payment history, from customers seeking Agency's assistance. Social Security numbers are not required for the CEAP program and may not be disclosed to Agency.
- Provide to Vendor, at Vendor's request, customer's written permission for Agency's access to customer information as stated above.
- Not provide pledges on behalf of a Certified Customer to Vendor without having adequate funds to pay such pledge.
- Pay pledges within forty-five days of making pledge to Vendor.
- Determine if a customer is a Certified Customer within five days of contacting Vendor.
- Provide Vendor a list of names, telephone numbers and e-mail addresses of Agency staff designated to make pledges on behalf of the Agency and Certified Clients, if requested from Vendor.

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Authorized Vendor Signature	Date
Sued Alishah	VP Financé
Typed Name of Authorized Signature	Title
281-552-8390	
Vendor (Area Code) Telephone Number	
Patricia Dovrenergy 11c. com	
Vendor Email Address	
Authorized Agency Signature	Date
TANO E TIJERINA	WEBB COUNTY JUDGE
Typed Name of Authorized Signature	Title
956-523-4600	
Agency (Area Code) Telephone Number	

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