

Control Number: 49779



Item Number: 1375

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PROJECT NO. 49779

1. Check the most appropriate box to describe this submission:				
☑This is a new broker registration				
☐This supplies information for a pending broker registration				
☐ This amends an existing, completed broker registration				
Provide an explanation of the amendment:				
2. Authorized Representative or Attorney to contact about this application:				
Name Sherman Jameson			Title President	
Business Mailing Address Po Box 60721				
City Midland	State Texas	Z ip <u>7</u>	9711	
Telephone Number 432-687-1047				
Email Address shermjameson@gmail.com				
3. Registering Entity : List the registering entity's legal business name, mailing address, telephone number, and email address.				
Business Name Edge Power Management, LLC				
Mailing address PO Box 60721				
City Midland	State Texas	Z ip <u>7</u>	9711	
Telephone Number 432-687-1047				
Email Address ccrossland@edgepowermanagement.com				



4. Description of the brokerage services provided by the registering person and type of customers served.				
Description of Services: Energy Procurement				
Types of Customers: Check all that apply				
☑Residential ☑Industrial ☑Commercial ☑Municipal		ther		
5. Other Names . List any trade, commercial, and doing-business-as (d/b/a) names, other than the legal name listed in #3 above, under which the registering entity intends to operate. Any name in which a corporation intends to operate must be registered with the Texas Secretary of State.				
1st	2 nd	-		
3 rd	4 th	4 th		
 6. Customer Service Contact. List the telephone number, business mailing address, and email address of the customer service department. If the registering entity does not have a dedicated customer service department, then provide the name, title, business mailing address, email address, and telephone number of the customer service contact person. Customer Service Department Telephone Email Address shermjameson@gmail.com 				
——————————————————————————————————————	Number	Eman Address		
Name Sherman Jameson	Title Preside	ent		
Business mailing address PO Box 60721				
City Midland	State Texas	Zip 79711		
Telephone Number 432-687-1047				
Email Address shermjameson@gmaill.com				
7. Regulatory contact person. List the name, business mailing address, telephone number, and email address for a regulatory contact person.				
Name Sherman Jameson	Title Presid	Title President		
Business mailing address PO Box 60721				
City Midland	State TX	Zip 79711		
Telephone Number 4326871047				
Email Address shermjameson@gmail.com				

AFFIDAVIT

My name is Sherman Jameson	I am the owner, partner, or an officer (Circle One) of the Applicant.
competent to testify to them, ar registering entity. I further swe all applicable laws and is in go the application are true, correct provided to the Public Utility Counderstands and will comply v	ersonal knowledge of the facts stated in the attached registration, that I amend that I have the authority to submit this application form on behalf of the ear or affirm that the applicant is authorized to do business in Texas under road standing with the Texas Secretary of State; that all statements made in a transport and that any material changes in such information will be commission of Texas in a timely manner. I swear or affirm that the applicant with all requirements of the applicable law and rules, including customer requirements, and marketing guidelines for retail electric service.
	Signature of Registering Entity's Owner, Partner, or Officer Printed Name
	Name of Registering Entity Name of Registering Entity
Swo	rn and subscribed before me this 24 day of February, 2005
AMANDA G. OYERBIDES Notary Public, State of Texas Comm. Expires 06-22-2021 Notary ID 131183618	Amande M. Oyulorden Notary Public in and For the State of My commission expires on