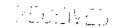


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2020 JUN 23 AM 10: 24 ELECTRICITY BROKER REGISTRATION FORM TY OF WHICE SIDE FILING CEEAK

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 Represo	entative or Attorney to contact ab	out this	application:	
Name Paul Clement			Title Owner	
Business Mailing Add	Iress 16423 Chimneystones Dr.			
City Houston	State Texas	Zip <u>7</u>	7095	
Telephone Number 832-531-1771				
Email Address paulclement0823@gmail.com				
3. Registering Entity : List the registering entity's legal business name, mailing address, telephone number, and email address.				
Business Name Paul Clement				
Mailing address 16423 Chimneystones Dr.				
City Houston	State Texas	Zip_	77095	
Telephone Number				
Email Address paulcle	ement0823@gmail.com			

4. Business structure Select the form of business being registered			
☑ Sole proprietor ☐ Corporation	☐ Partners	hip	
☐ Limited Liability Company (LLC)	☐ Limited Partnership		
5. Other Names I ist any trade, commercial, a listed in '3 above, under which the registering contends to operate must be registered with the T	entity intends	iness-as (d b a) names, other than the legal name to operate. Any name in which a corporation y of State	
1 st	2 nd		
3 rd	4 th		
6. Customer Service Contact. List the telephocustomer service department. If the registering then provide the name, title, business mailing acservice contact person. Name Paul Clement	entity does no ldress, email a		
	Title Owner		
Business mailing address 16423 Chimneyston	es Dr.		
City Houston	State Texas	Zip 77095	
Telephone Number			
Email Address paulclement0823@gmail.com			
7. Commission contact person—List the name for a person who Commission Staff may contact		iling address, telephone number, and email address	
Name Paul Clement	Title Owner		
Business mailing address 16423 Chimneyston	nes Dr.		
City Houston	State Texa:	Zip 77095	
Telephone Number <u>832-531-1771</u>			
Email Address paulclement0823@gmail.com			

AFFIDAVIT

My name is Paul Clement	. I am the owner, partner, or an officer (Circle One) of the Applicant.
competent to testify to them, and that registering entity. I further swear or all applicable laws and is in good state the application are true, correct and a provided to the Public Utility Committee understands and will comply with all	I knowledge of the facts stated in the attached registration, that I am I I have the authority to submit this application form on behalf of the affirm that the applicant is authorized to do business in Texas under anding with the Texas Secretary of State; that all statements made in complete; and that any material changes in such information will be ssion of Texas in a timely manner. I swear or affirm that the applicant II requirements of the applicable law and rules, including customer tirements, and marketing guidelines for retail electric service.
	Signature of Registering Entity's Owner, Partner, or Officer Paul Clement Printed Name
	Name of Registering Entity
Sworn and THY ANH NGUYEN My Notary ID # 126525606 Expires Mary 19, 2024	Notary Public in and For the State of Texas My commission expires on 5 19 2024