

## **Filing Receipt**

Filing Date - 2025-03-07 09:45:38 AM

Control Number - 49779

Item Number - 4499



## ELECTRICITY BROKER REGISTRATION FORM

## PROJECT NO. 49779

1. Check the most ap	propriate box to descri	be this submission			
☐This is a new bro	ker registration				
☐This supplies info	ormation for a pending b	roker registration			
☑ This amends an	existing, completed broke	er registration			
Provide an explan Renewal BR19030	ation of the amendment: 2				
				_	
THE RESERVE OF THE PARTY OF THE	sentative or Attorney to	contact about this	s application:		
Name Patrick Isenho	wer		Title Owner	_	
Business Mailing Ad	dress PO BOX 212				
City Matagorda	State Tx	Zip _7	Zip <u>77457</u>		
Telephone Number	832-563-2865				
	ck.isenhower@mail.com				
		ty's legal business i	name, mailing address, telephone numbe	r, and	
Business Name Free	dom PWR			_	
Mailing address PO	BOX 212			_	
City Matagorda	State Tx	Zip	77457		
Telephone Number 8	332-563-2865				
Email Address patrio	ck.isenhower@mail.com				

4. Business structure. Select the form of busin	ess being reg	istered.			
☑ Sole proprietor ☐ Corporation	☐ Partners	hip			
☐ Limited Liability Company (LLC)	☐ Limited Partnership				
5. Other Names. List any trade, commercial, a listed in #3 above, under which the registering e intends to operate must be registered with the To	ntity intends	to operate. Any name in which a corporation			
I <sub>81</sub>	2 <sup>nd</sup>				
3 <sup>rd</sup>	4 <sup>th</sup>				
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.					
Name Patrick Isenhower	Title Owner				
Business mailing address PO BOX 212					
City Matagorda	State tx	Zip <u>77457</u>			
Telephone Number 832-563-2865					
Email Address patrick.isenhower@mail.com					
7. Commission contact person. List the name for a person who Commission Staff may contact	t.	iling address, telephone number, and email address			
Name Patrick Isenhower	Title Owner				
Business mailing address PO BOX 212					
City Matagorda	State Tx	Zip <u>77457</u>			
Telephone Number 832-563-2865					
Email Address patrick.isenhower@mail.com					

## AFFIDAVIT

My name is Patrick Isenhower . I am the owner, partner, or an officer (Circle One) of the Applicant.
I swear or affirm that I have personal knowledge of the facts stated in the attached registration, that I am competent to testify to them, and that I have the authority to submit this application form on behalf of the registering entity. I further swear or affirm that the applicant is authorized to do business in Texas under all applicable laws and is in good standing with the Texas Secretary of State; that all statements made in the application are true, correct and complete; and that any material changes in such information will be provided to the Public Utility Commission of Texas in a timely manner. I swear or affirm that the applicant understands and will comply with all requirements of the applicable law and rules, including customer protection provisions, disclosure requirements, and marketing guidelines for retail electric service.
Signature of Registering Entity's Owner, Partner, or Officer
Patrick Isenhower
Printed Name
Freedom PWR
Name of Registering Entity
Sworn and subscribed before me this
REGINA MARIE TREYEIG  Notary ID #126909124  My Commission Expires  June 22, 2025  My commission expires on 6 - 22 - 2