

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY

**W-04120A**

Grand Canyon Caverns and Inn, LLC  
PO Box 180  
Peach Springs, AZ 86434

RECEIVED

APR 05 2013

ACC UTILITIES DIRECTOR

**ANNUAL REPORT**  
**Water**

**FOR YEAR ENDING**

12	31	2012
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FOR COMMISSION USE

ANN 04	12
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4-8-13

## COMPANY INFORMATION

**Company Name (Business Name)** GRAND CANYON CAVERNS & INN LLC

**Mailing Address** PO BOX 180  
(Street)

PEACH SPRINGS AZ 86434-0180  
(City) (State) (Zip)

928-422-4565 928-422-4470 N/A  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** shelly.grandcanyoncaverns@gmail.com

**Local Office Mailing Address** PO BOX 180  
(Street)

PEACH SPRINGS AZ 86434-0180  
(City) (State) (Zip)

928-422-4565 928-422-4470 N/A  
Local Office Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** shelly.grandcanyoncaverns@gmail.com

## MANAGEMENT INFORMATION

**Regulatory Contact:**

**Management Contact:** SHELLY MUSSELL MANAGER  
(Name) (Title)

PO BOX 180 PEACH SPRINGS AZ 86434-0180  
(Street) (City) (State) (Zip)

928-422-4565 928-422-4470 N/A  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** shelly.grandcanyoncaverns@gmail.com

**On Site Manager:** SHELLY MUSSELL  
(Name)

PO BOX 180 PEACH SPRINGS AZ 86434-0180  
(Street) (City) (State) (Zip)

928-422-4565 928-422-4565 N/A  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** shelly.grandcanyoncaverns@gmail.com

**Statutory Agent:** MICHAEL KADLETZ  
(Name)

PO BOX 180 PEACH SPRINGS AZ 86434-0180  
(Street) (City) (State) (Zip)

928-422-4565 928-422-4570 N/A  
Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Attorney:** N/A  
(Name)

(Street) (City) (State) (Zip)

Telephone No. (Include Area Code) Fax No. (Include Area Code) Cell No. (Include Area Code)

**Email Address** mike.grandcanyoncaverns@gmail.com

**OWNERSHIP INFORMATION**

Check the following box that applies to your company:

<input type="checkbox"/> Sole Proprietor (S)	<input type="checkbox"/> C Corporation (C) (Other than Association/Co-op)
<input type="checkbox"/> Partnership (P)	<input type="checkbox"/> Subchapter S Corporation (Z)
<input type="checkbox"/> Bankruptcy (B)	<input type="checkbox"/> Association/Co-op (A)
<input type="checkbox"/> Receivership (R)	<input checked="" type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Other (Describe) _____	

**COUNTIES SERVED**

Check the box below for the county/ies in which you are certificated to provide service:

<input type="checkbox"/> APACHE	<input type="checkbox"/> COCHISE	<input checked="" type="checkbox"/> COCONINO
<input type="checkbox"/> GILA	<input type="checkbox"/> GRAHAM	<input type="checkbox"/> GREENLEE
<input type="checkbox"/> LA PAZ	<input type="checkbox"/> MARICOPA	<input type="checkbox"/> MOHAVE
<input type="checkbox"/> NAVAJO	<input type="checkbox"/> PIMA	<input type="checkbox"/> PINAL
<input type="checkbox"/> SANTA CRUZ	<input type="checkbox"/> YAVAPAI	<input type="checkbox"/> YUMA
<input type="checkbox"/> STATEWIDE		

**UTILITY PLANT IN SERVICE**

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	100,000	100,000	0
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	100,000	100,000	0

This amount goes on the Balance Sheet Acct. No. 108

**CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (1)</b>	<b>Depreciation Percentage (2)</b>	<b>Depreciation Expense (1x2)</b>
301	Organization			
302	Franchises			
303	Land and Land Rights			
304	Structures and Improvements	100,000	0	0
307	Wells and Springs			
311	Pumping Equipment			
320	Water Treatment Equipment			
330	Distribution Reservoirs and Standpipes			
331	Transmission and Distribution Mains			
333	Services			
334	Meters and Meter Installations			
335	Hydrants			
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment			
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	100,000	0	0

This amount goes on the Comparative Statement of Income and Expense  
Acct. No. 403.



**BALANCE SHEET**

Acct No.	ASSETS	BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>CURRENT AND ACCRUED ASSETS</b>		
131	Cash (KT Wells Credit)	\$ 23.42	\$ 9.57
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable (Water Only & Includes Tax)	96.53	221.38
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	\$ 119.95	\$ 230.95
	<b>FIXED ASSETS</b>		
101	Utility Plant in Service	\$ 100,000.00	\$ 100,000.00
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	<100,000.00>	<100,000.00>
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	<b>TOTAL FIXED ASSETS</b>	\$ 0.00	\$ 0.00
	<b>TOTAL ASSETS</b>	\$ 119.95	\$ 230.95

**NOTE:** The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.

**NOTE:** All amounts are extrapolated from overall corporate financial records.  
The water utility does not maintain separate financial records.

**BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITES</b>		
231	Accounts Payable (Water Testing)	\$ 776.00	\$ 776.00
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes		
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	<b>TOTAL CURRENT LIABILITIES</b>	\$ 776.00	\$ 776.00
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds	\$ 0.00	\$ 0.00
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt	\$ 0.00	\$ 0.00
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	<b>TOTAL DEFERRED CREDITS</b>	\$ 0.00	\$ 0.00
	<b>TOTAL LIABILITIES</b>	\$ 776.00	\$ 776.00
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued	\$ 100,000.00	\$ 100,000.00
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	<100,656.05>	<100,545.05>
218	Proprietary Capital (Sole Props and Partnerships)		
	<b>TOTAL CAPITAL</b>	\$ <656.05>	\$ <545.05>
	<b>TOTAL LIABILITIES AND CAPITAL</b>	\$ 119.95	\$ 230.95

NOTE: All amounts are extrapolated from overall corporate financial records.  
The water utility does not maintain separate financial records.

**COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
461	Metered Water Revenue (Customer Invoices)	\$ 2,531.29	\$ 2,038.27
460	Unmetered Water Revenue		
474	Other Water Revenues (Motel)	3,076.79	3,991.43
	<b>TOTAL REVENUES</b> (Taxes NOT Included)	\$ 5,608.08	\$ 6,029.70
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$ 3,255.00	\$ 1,995.00
610	Purchased Water		
615	Purchased Power (Acct 104978-002 / -005)	12,300.67	7,532.46
618	Chemicals	282.52	188.35
620	Repairs and Maintenance	5,404.73	4,303.02
621	Office Supplies and Expense		
630	Outside Services		
635	Water Testing	3,101.00	5,259.00
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability		
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case		
675	Miscellaneous Expense (Bad Debt)	0	<222.04>
403	Depreciation Expense		
408	Taxes Other Than Income		
408.11	Property Taxes (947-80-200)	185.52	159.82
409	Income Tax		
	<b>TOTAL OPERATING EXPENSES</b>	\$ 24,529.44	\$ 19,215.61
	<b>OPERATING INCOME/(LOSS)</b>	\$ <18,921.36>	\$ <13,185.91>
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income		
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	<2.40>	
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	\$ <2.40>	\$ 0
	<b>NET INCOME/(LOSS)</b>	\$ <18,923.76>	\$ <13,185.91>

NOTE: All amounts are extrapolated from overall corporate financial records.  
The water utility does not maintain separate financial records.

**COMPANY NAME**

GRAND CANYON CAVERNS &amp; INN LLC

**SUPPLEMENTAL FINANCIAL DATA****Long-Term Debt**

	<b>LOAN #1</b>	<b>LOAN #2</b>	<b>LOAN #3</b>	<b>LOAN #4</b>
Date Issued	NONE	NONE	NONE	NONE
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End

\$ 0

Meter Deposits Refunded During the Test Year

\$ 0

<b>COMPANY NAME</b>	GRAND CANYON CAVERNS & INN LLC		
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>	03-112	

**WATER COMPANY PLANT DESCRIPTION**

**WELLS**

<b>ADWR ID Number*</b>	<b>Pump Horsepower</b>	<b>Pump Yield (gpm)</b>	<b>Casing Depth (Feet)</b>	<b>Casing Diameter (Inches)</b>	<b>Meter Size (inches)</b>	<b>Year Drilled</b>
55-627-217	5 HP	66'	1000	6"		Unknown
BALDOR MOTOR						
GRAND L PUMPS						
F0018321						

\* Arizona Department of Water Resources Identification Number

**OTHER WATER SOURCES**

<b>Name or Description</b>	<b>Capacity (gpm)</b>	<b>Gallons Purchased or Obtained (in thousands)</b>
NONE		

<b>BOOSTER PUMPS</b>		<b>FIRE HYDRANTS</b>	
<b>Horsepower</b>	<b>Quantity</b>	<b>Quantity Standard</b>	<b>Quantity Other</b>
BALDOR 5 HP	2	-	-

<b>STORAGE TANKS</b>		<b>PRESSURE TANKS</b>	
<b>Capacity</b>	<b>Quantity</b>	<b>Capacity</b>	<b>Quantity</b>
203,000	1	NONE	
100,000	1		

*Note: If you are filing for more than one system, please provide separate sheets for each system.*

<b>COMPANY NAME</b>	GRAND CANYON CAVERNS & INN LLC	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>	03-112

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

MAINS		
Size (in inches)	Material	Length (in feet)
2		
3	PLASTIC	44,880 (8.5 Miles)
4		
5		
6		
8		
10		
12		

CUSTOMER METERS	
Size (in inches)	Quantity
5/8 X 3/4	
3/4	
1	
1 1/2	
2	8
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

**For the following three items, list the utility owned assets in each category for each system.**

**TREATMENT EQUIPMENT:**

Chlorine Control Pump

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**STRUCTURES:**

8' x 12' Block Building Pump Station

4' x 4' Booster Pump Shed

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**OTHER:**

None

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*Note: If you are filing for more than one system, please provide separate sheets for each system.*

<b>COMPANY NAME:</b>	GRAND CANYON CAVERNS & INN LLC		
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>	03-112	

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2012**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	8	103	459	N/A
FEBRUARY	8	64	223	N/A
MARCH	8	47	468	N/A
APRIL	8	96	475	N/A
MAY	8	199	494	N/A
JUNE	8	196	541	N/A
JULY	9	162	491	N/A
AUGUST	9	114	380	N/A
SEPTEMBER	9	143	378	N/A
OCTOBER	9	128	417	N/A
NOVEMBER	9	64	354	N/A
DECEMBER	9	131	266	N/A
<b>TOTALS →</b>		<b>1447</b>	<b>4946</b>	<b>N/A</b>

What is the level of arsenic for each well on your system? 0.038 mg/l PPB  
(If more than one well, please list each separately.)

If system has fire hydrants, what is the fire flow requirement? \_\_\_\_\_ GPM for \_\_\_\_\_ hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?  
 Yes                       No

Is the Water Utility located in an ADWR Active Management Area (AMA)?  
 Yes                       No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?  
 Yes                       No

If yes, provide the GPCPD amount: \_\_\_\_\_

*Note: If you are filing for more than one system, please provide separate data sheets for each system.*

<b>COMPANY NAME:</b>	GRAND CANYON CAVERNS & INN LLC
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b> 03-112

**UTILITY SHUTOFFS / DISCONNECTS**

<b>MONTH</b>	<b>Termination without Notice R14-2-410.B</b>	<b>Termination with Notice R14-2-410.C</b>	<b>OTHER (Re-Connect)</b>
JANUARY	-	-	-
FEBRUARY	-	-	-
MARCH	-	-	-
APRIL	-	-	-
MAY	-	-	-
JUNE	-	-	-
JULY	-	-	1
AUGUST	-	-	-
SEPTEMBER	-	-	-
OCTOBER	-	-	-
NOVEMBER	-	-	-
DECEMBER	-	-	-
<b>TOTALS →</b>	<b>0</b>	<b>0</b>	<b>1</b>

OTHER (description):

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Was disconnected July 2010, then re-connected July 2012

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**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2012 was: \$ 159.82

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VERIFICATION  
AND  
SWORN STATEMENT**  
Taxes

RECEIVED

APR 05 2013

ACC UTILITIES DIRECTOR

**VERIFICATION**

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	COCONINO
NAME (OWNER OR OFFICIAL) TITLE	SHELLY A MUSSELL, MANAGER
COMPANY NAME	GRAND CANYON CAVERNS & INN LLC

**DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE ARIZONA CORPORATION COMMISSION**

FOR THE YEAR ENDING

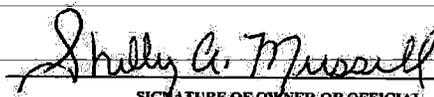
MONTH	DAY	YEAR
12	31	2012

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND PAID IN FULL.

  
\_\_\_\_\_  
SIGNATURE OF OWNER OR OFFICIAL  
928-422-4565  
\_\_\_\_\_  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME, TERESA I. MARTIN,

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 25TH DAY OF

COUNTY NAME	MARICOPA	
MONTH	MARCH	2013



  
\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

MY COMMISSION EXPIRES \_\_\_\_\_

**INCOME TAXES**

For this reporting period, provide the following:

Federal Taxable Income Reported Part of a larger entity.  
 Estimated or Actual Federal Tax Liability Does not file a tax

State Taxable Income Reported return for utility only.  
 Estimated or Actual State Tax Liability " "

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances -  
 Amount of Gross-Up Tax Collected -  
 Total Grossed-Up Contributions/Advances -

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

\_\_\_\_\_  
**SIGNATURE** March 25, 2013  
**DATE**

\_\_\_\_\_  
**PRINTED NAME** Shelly A Mussell  
**TITLE** Manager

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

RECEIVED  
APR 05 2013  
ACC UTILITIES DIRECTOR

**VERIFICATION**

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)	COCONINO
NAME (OWNER OR OFFICIAL) TITLE	SHELLY A. MUSSELL, MANAGER
COMPANY NAME	GRAND CANYON CAVERNS & INN LLC

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2012

**HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.**

**SWORN STATEMENT**

**IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2012 WAS:**

Arizona Intrastate Gross Operating Revenues Only (\$)
\$ <u>6,039.10</u>

**(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ 9.40  
IN SALES TAXES BILLED, OR COLLECTED)**

**\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

*Shelly A. Mussell*  
SIGNATURE OF OWNER OR OFFICIAL  
928-422-4565  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS 25TH DAY OF

COUNTY NAME	MARICOPA
MONTH	MARCH
	2013

OFFICIAL SEAL  
**TERESA I. MARTIN**  
Notary Public - State of Arizona  
MARICOPA COUNTY  
MY COMMISSION EXPIRES My Comm. Expires Dec. 10, 2013

*Teresa I. Martin*  
SIGNATURE OF NOTARY PUBLIC

**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only**

RECEIVED  
APR 05 2013  
ACC UTILITIES DIRECTOR

**VERIFICATION**

**STATE OF ARIZONA**

**I, THE UNDERSIGNED  
OF THE**

COUNTY OF (COUNTY NAME)	COCONINO		
NAME (OWNER OR OFFICIAL)	SHELLY A MUSSELL	TITLE	MANAGER
COMPANY NAME	GRAND CANYON CAVERNS & INN LLC		

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION  
FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2012

**HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.**

**SWORN STATEMENT**

**IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2012 WAS:**

ARIZONA INTRASTATE GROSS OPERATING REVENUES
\$ <u>2,042.50</u>

**THE AMOUNT IN BOX AT LEFT  
INCLUDES \$ 4.23  
IN SALES TAXES BILLED, OR COLLECTED)**

**\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.**

*Shelly A. Mussell*  
SIGNATURE OF OWNER OR OFFICIAL  
928-422-4565  
TELEPHONE NUMBER

**SUBSCRIBED AND SWORN TO BEFORE ME**

**A NOTARY PUBLIC IN AND FOR THE COUNTY OF**

**THIS** 25TH **DAY OF**

NOTARY PUBLIC NAME	TERESA I. MARTIN		
COUNTY NAME	MARICOPA		
MONTH	MARCH	YEAR	2013



*Teresa I. Martin*  
SIGNATURE OF NOTARY PUBLIC

**MY COMMISSION EXPIRES** \_\_\_\_\_