

GRI VOLUNTARY CONTRIBUTION FORM

Submit this form and contribution to: Iroquois Gas Transmission System, L.P.
 Attn: John Monoski
 One Corporate Drive, Suite 600
 Shelton, CT 06484
 Telephone: (203) 925-7273
 Fax: (203) 929-9501

CONTRIBUTER INFORMATION

Company Name: _____
 Company Address: _____

 Type of Company: _____
 (end user, marketer, LDC, producer, etc.)

GAS RESEARCH INSTITUTE (GRI) VOLUNTARY CONTRIBUTION

Total contribution to GRI's research, development and demonstration (RD&D) program(s):
 US\$ _____

GAS RESEARCH INSTITUTE (GRI) VOLUNTARY CONTRIBUTION DESIGNATION

Optionally, to designate specific GRI recipient program(s)/project(s), please check one or more of the following and fill in the desired contribution amount:

Program	Project	Description	Amount (US\$)
<input type="radio"/> CORE	2401	Increased Gas Supply from Emerging Resources	
<input type="radio"/> CORE	2402	Improved Gas System Reliability and Integrity	
<input type="radio"/> CORE	2403	Lowered Operating and Maintenance Costs	
<input type="radio"/> CORE	2404	Increased Efficiency of Use	
<input type="radio"/> CORE	2405	Enhanced Environmental Quality	
<input type="radio"/> CORE	2406	Enhanced Health and Safety	

AND/OR fill in the following table to designate other GRI recipient program(s)/project(s):

Program	Project	Description	Amount (US\$)

The total of the contributions listed in the above two tables must equal the total contribution listed above.

IMPORTANT

1. If payment is to be made by check, it should be remitted together with this form.
2. If payment is to be made via wire transfer, this form should be mailed by the date that the wire transfer is made. Additionally, the wire transfer should indicate the portion of funds to be allocated as a voluntary contribution to GRI.
3. All revenues received from the contributor by Iroquois for the purpose of making a voluntary contribution to GRI shall be remitted to GRI within 15 business days of receipt of revenues and this form, less any amounts properly payable to federal, state or local authority relating to such revenue.

Signed: _____ Date: _____
 Print Name: _____ Title: _____