

Annex A.1. Guidelines in Filling-up Monthly Operations Report – Supplier Portfolio Data (MOR-SPD) Template

Column	Field Name	Description	Data Format	Data Requirement
A	Participant ID	Corresponds to the User ID provided by the DEPDMS Administrator. EOF (End Of File) shall be placed after the last filled-up cell in column A.	Alphanumeric	Mandatory *Must not be blank if any columns to the right is filled-up.
B	Power Suppliers	Corresponds to the name of generation unit where the Supplier purchased its electricity supply. Refer to the "INPUT" column of Appendix A	Alphanumeric	Mandatory
C	Contracted Capacity [MW]	Corresponds to the Demand in MW as stated in the Contract with <i>Power Supplier</i> .	Numeric, 4 decimal places	Mandatory* *May be blank only if column D has input
D	Contracted Energy [MWh]	Corresponds to Energy in MWh as indicated in the contract with Power Supplier. If the Power Supplier is WESM, input the energy indicated in the billing statement during the billing month.	Numeric, 4 decimal places	Mandatory* *May be blank only if column C has input
E	Generation Cost [PhP/kWh]	Corresponds to the (a) Contract Price in PhP/kWh as indicated in the Contract; or (b)if not indicated in the contract, it shall be calculated as the total amount billed by the Power Supplier in PhP (including Adjustments and excluding Value Added Tax (VAT)) divided by total Contracted Energy in kWh for the billing month.	Numeric, 4 decimal places	Mandatory
F	Contract Start	Corresponds to the Start date of Contract with the Power Supplier	Date in yyyy-mm-dd format	Mandatory** **May be blank only if Power Supplier is WESM
G	Contract End	Corresponds to the End date of Contract with the Power Supplier	Date in yyyy-mm-dd format	Mandatory** **May be blank only if Power Supplier is WESM
H	Generator Affiliated to Supplier	Y for Yes and N for No. Confirmation whether the Supplier is under same mother company or is under the management of Power Supplier. It includes joint venture, partially- ownership, or owns company shares directly and/or indirectly.	Alphabet, Y or N only	Mandatory

Annex A.2. Template for MOR-SPD

Participant ID	Power Suppliers	Contracted Capacity [MW]	Contracted Energy [MWh]	Generation Cost [PhP/kWh]	Contract Start	Contract End	Generator Affiliated to Supplier
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Annex B.1. Guidelines in Filling-up Monthly Operations Report – Supplier Sales Data (MOR-SSD) Template

Column	Field Name	Description	Data Format	Data Requirement
A	Participant ID	Corresponds to the User ID provided by the DEPDMS Administrator. EOF (End Of File) shall be placed after the last filled-up cell in column A.	Alphanumeric	Mandatory *Must not be blank if any columns to the right is filled-up.
B	Region	Corresponds to the Administrative Region (e.g., R1, CAR, and NCR) where the Contestable Customer is located as indicated in Appendix B .	Alphanumeric	Mandatory
C	Contestable Customer Name	Corresponds to the name of Contestable Customer (CC) as stated in the contract. Never use comma (,). Use forward slash (/) as line separation instead of comma (,). e.g. ABC Electric Cooperative/ Inc.	Alphanumeric	Mandatory
D	Wheeling Service Provider	Corresponds to the DU or the Network Service Provider providing the wheeling services as indicated in Appendix C .	Alphanumeric	Mandatory
E	Customers Category	Corresponds to the classification of customers as indicated in Appendix D .	Alphanumeric	Mandatory
F	Contracted Capacity [MW]	Corresponds to the Customer's Demand in MW as stated in the retail supply contract.	Numeric, 4 decimal places	Mandatory* *May be blank only if column G has input
G	Contracted Energy [MWh]	Corresponds to Customer's Energy requirement, in MWh, as stated in the retail supply contract.	Numeric, 4 decimal places	Mandatory* *May be blank only if column F has input
H	Supply Cost [PhP/kWh]	Corresponds to the charge imposed to the contestable customer for the supply of energy which may correspond to the Generation Cost and supplier's charge, it shall be calculated as the total amount billed to the Customer in PhP (excluding Adjustments and excluding Value Added Tax (VAT)) divided by total energy delivered in kWh for the billing month.	Numeric, 4 decimal places	Mandatory

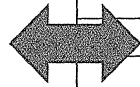
I	Contract Start	Corresponds to the start date of Contract with the CC	Date in <i>yyyy-mm-dd</i> format	Mandatory
J	Contract End	Corresponds to the End date of Contract with the CC	Date in <i>yyyy-mm-dd</i> format	Mandatory
K	Actual Energy Delivered, MWh	Corresponds to the actual energy delivered to the customer as indicated in the billing documents, in MWh, during the billing month.	Numeric, 4 decimal places	Mandatory

Annex B.2. Template for MOR-SSD

Participant ID	Region	Contestable Customer Name	DU Franchise	Customers Category	Contracted Capacity [MW]	Contracted Energy [MWh]
EOF						



Supply Cost [PhP/kWh]	Contract Start	Contract End	Actual Energy Delivered [MWh]



Annex C.1. Guidelines in Filling-up Supplier Company Profile (RES-PROFILE) Template

Column	Field Name	Description	Data Format	Data Requirement
A	Participant ID	Corresponds to the User ID provided by the DEPDMS Administrator. EOF (End Of File) shall be placed after the last filled-up cell in column A.	Alphanumeric	Mandatory
B	Name of RES/LRES	Corresponds to the Full name of Supplier as registered in the WESM. Never use comma (,). Use forward slash (/) as line separation instead of comma (,). e.g. ABC Electric Cooperative/ Inc.	Alphanumeric	Mandatory
C	Office Address	Corresponds to the main office address of the Supplier. Never use comma (,). Use forward slash (/) as line separation instead of comma (,). e.g. Energy Center/ Rizal Drive/ BGC/ Taguig City	Alphanumeric	Mandatory
D	License/Certificate No.	Corresponds to the License or Certificate number to operate as Retail Electricity Supplier as provided by the ERC	Alphanumeric	Mandatory
E	Head of Company	Name of the Head of Company	Alphanumeric	Mandatory
F	Position/Designation	Position/Designation of the Head of Company	Alphanumeric	Mandatory
G	WESM Compliance Officer	Name of the WESM Compliance Officer	Alphanumeric	Mandatory
H	Contact No.	Official Telephone or mobile number of the Compliance Officer	Numeric	Mandatory
I	Email Address	Office email address of the Compliance Officer	Alphanumeric	Blank, if not applicable

