



Elaine F. Marshall, Secretary of State

2024 Principal Expense Report Form – Fourth Quarter Zero Expense Short Form

For quarterly reports with no reportable expenditures; if you have reportable expenditures, use Form PR-ER.

Mailing Address:

PO Box 29622
Raleigh, NC 27626-0622

Street Address:

2 South Salisbury St.
Raleigh, NC 27601-2903

Amended Report (Check if amending the report)
Period: Quarter Ended December 31, 2024

Original Tracking No. _____

Complete Name of Principal as Registered: Dominion Energy, Inc. and Align RNG North Carolina, LLC

If the registered lobbyist principal has directed any lobbyist listed below to lobby on behalf of an unregistered associated entity, the principal must complete and attach Schedule PR-QAE to this quarterly report. The absence of such attachment constitutes the authorized officer's affirmative statement under oath that there are no such unreported associated entities pursuant to NCGS § 120C-403(b)(5) to disclose for the reporting period.

Name(s) of Lobbyist(s) as Registered: John White, James A. Harrell III, Robert W. Kaylor, Johnnv L. Tillett, Thomas Wavne Sevier, Jr.

Include all lobbyists registered during the calendar year, including interim resignations/terminations.

You **must** mark one of these boxes. If you choose to deliver the paper original document to the Division, and fail to do so, the report will not be deemed filed until the date we receive it, which may make your report late. 18 NCAC 12 .0308.

choose to maintain the paper original inked, signed, and notarized lobbying expense report in my own records for three years as required by Administrative Rule 18 NCAC 12 .1301; OR

I choose to deliver the paper original inked, signed, and notarized lobbying expense report to the Lobbying Compliance Division of the Secretary of State within seven days as required by Administrative Rule 18 NCAC 12 .0214.

****2024 Cumulative Combined Lobbyist Payment for Services****

<i>This form must be completed in its entirety. Incomplete reports may be rejected.</i>	CUMULATIVE COMBINED 2024 PAYMENT FOR SERVICES
Failure to provide payee information will result in rejection of this report.	
For this registration year: (1) Enter the dollar amount of the cumulative combined total payments to all lobbyists named on this quarterly report of the principal.	\$301,032
(2) List the name(s) of the payees (Lobbyists names and/or Firm Name): <u>John White, James A. Harrell III, Robert W. Kaylor, Johnnv L. Tillett, Thomas Wavne Sevier, Jr.</u>	
Prior to the end of this fourth quarter of this calendar year, if you previously submitted a separate expense form to report cumulative combined payments to terminated or resigned lobbyists, enter the dollar amount. If not, include the total dollar amount for the 2024 cumulative lobbyist payment for services to all active, resigned or terminated lobbyists in the first and third blocks on this form.	\$0
Total cumulative combined payment for services for all lobbyists of the principal registered in 2024.	\$301,032

Important instructions for principal officer and notary

All blanks **must** be completed with printed name of authorized officer and printed name of principal entity. The authorized officer **must** sign and date report to certify report in this section. For quarterly report under oath, venue (state and county where notarized) and jurat **must** also be completed. Signatory authorized officer must be a person of record with the lobbying compliance division for reporting purposes in current year. **Warning:** Incomplete certification or notarization may result in rejection of report.

STATE OF Virginia (Must be filled in)
COUNTY OF Richmond City (Must be filled in)

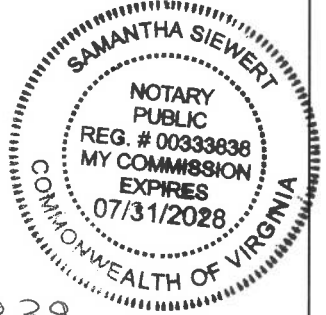
The undersigned as an authorized officer of the above named principal entity on behalf of the principal entity by its authority first duly given, or on the undersigned's own behalf as an individual principal, being first duly sworn, hereby certifies that the principal has no expenditures pursuant to NCGS § 120C-403 other than payment for services to report for this quarterly period and that all information contained herein (including any attachments hereto) is true, complete and correct to the best of my knowledge and belief.

James Beamer Signature of Authorized Officer James Beamer Printed name of Authorized Officer 1/9/25 Date

Sworn to (or affirmed) and subscribed before me,
this 09 day of January, 2025.

Samantha Siewert Signature of Notary Public
Samantha Siewert Printed Name of Notary Public

My commission expires: 7/31/2028



Reg #00333838
(NOTARY STAMP OR SEAL)

Printed Full Name of Report Preparer: Samantha Siewert
Signature of Report Preparer: Samantha Siewert

You only have to sign as the report preparer if: (1) you are **not** the lobbyist required to file the report, **and** (2) you exercised discretion and independent judgment in filling the form.