



Office of Public Instruction
Linda McCulloch,
Superintendent
PO Box 202501
Helena, MT 59620-2501

CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0519	1	Troy Elem	27	EL

Proposed Restricted Indirect Cost Rate _____% (Round to nearest hundredth (X.XX%) of a percent.)

INSTRUCTIONS: Complete and submit with one copy of each application for Indirect Cost Rate. A separate application should be submitted for the elementary and high school district. A copy of this certification will be returned upon approval of your rate.

This is to certify that I have reviewed the indirect cost rate proposal submitted herewith and to the best of my knowledge and belief:

(1) All costs included in this proposal to establish the final indirect cost rate for the periods indicated above are allowable in accordance with the requirements of the Federal award(s) to which they apply and OMB Circular A-87, "Cost Principles for State and Local Governments." Unallowable costs have been adjusted in allocating costs as indicated in the attached Predetermined Indirect Cost Allocation - Schedule A.

(2) All costs included in the proposal are properly allocable to Federal awards on the basis of a beneficial or casual relationship between the expenses incurred and the agreements to which they are allocated in accordance with applicable requirements. Further, the same costs that have been treated as indirect costs have not been claimed as direct costs. In addition, similar types of costs have been accounted for consistently and the Office of Public Instruction will be notified of any accounting changes that would affect the predetermined rate.

I declare that the foregoing is true and correct.

Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	Box 867	
Printed Name of Authorized Official	City	Zip Code
	Troy	59935
Title	Date	

Send completed form to:
School Accounting and Budgeting
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

ACCEPTED AND APPROVED FOR THE SUPERINTENDENT OF PUBLIC INSTRUCTION BY:

Approved Rate for FY2007	Date Approved
	Signature



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Superintendent
PO Box 202501
Helena, MT 59620-2501

CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0520	1	Troy H S	27	HS

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0522	4	Libby K-12 Schools	27	K12

Proposed Restricted Indirect Cost Rate _____% (Round to nearest hundredth (X.XX%) of a percent.)

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I declare that the foregoing is true and correct.

Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	724 Louisiana Ave	
Printed Name of Authorized Official	City	Zip Code
	Libby	59923
Title	Date	

Send completed form to:
School Accounting and Budgeting
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

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Helena, MT 59620-2501

CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity # 0527	School Dist. # 13	School Name Eureka Elem	County 27	Level EL
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Proposed Restricted Indirect Cost Rate _____% (Round to nearest hundredth (X.XX%) of a percent.)

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I declare that the foregoing is true and correct.

Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box PO Box 2000	
Printed Name of Authorized Official	City Eureka	Zip Code 59917
Title	Date	

Send completed form to:
School Accounting and Budgeting
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0528	CO	Lincoln County H S	27	HS

Proposed Restricted Indirect Cost Rate _____% (Round to nearest hundredth (X.XX%) of a percent.)

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	PO Box 2000	
Printed Name of Authorized Official	City	Zip Code
	Eureka	59917
Title	Date	

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0529	14	Fortine Elem	27	EL

Proposed Restricted Indirect Cost Rate _____% (Round to nearest hundredth (X.XX%) of a percent.)

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Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	Box 96	
Printed Name of Authorized Official	City	Zip Code
	Fortine	59918
Title	Date	

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0530	15	McCormick Elem	27	EL

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I declare that the foregoing is true and correct.

Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	1860 Old Highway 2 North	
Printed Name of Authorized Official	City	Zip Code
	Troy	59935
Title	Date	

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0532	23	Sylvanite Elem	27	EL

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Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	11784 Yaak River Road	
Printed Name of Authorized Official	City	Zip Code
	Troy	59935
Title	Date	

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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0533	24	Yaak Elem	27	EL

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Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	30117 Yaak River Road	
Printed Name of Authorized Official	City	Zip Code
	Troy	59935
Title	Date	

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Office of Public Instruction
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Helena, MT 59620-2501

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Superintendent
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CERTIFICATION FOR INDIRECT COST RATE

For FY 2006-2007

Due May 31, 2006

Legal Entity #	School Dist. #	School Name	County	Level
0534	53	Trego Elem	27	EL

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Signature of District Superintendent or Board Chairperson	Street Address or P.O. Box	
	PO Box 10	
Printed Name of Authorized Official	City	Zip Code
	Trego	59934
Title	Date	

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