



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

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0846	5	Park City Elem	48	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.

<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	PO Box 278	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Park City	59063
<b>Title</b>	<b>Date</b>	

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:**

<b>Approved Rate for FY2009</b>	Date Approved
	Signature



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

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0847	5	Park City H S	48	HS

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

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	Park City	59063
<b>Title</b>	<b>Date</b>	

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0848	6	Columbus Elem	48	EL

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

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<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	433 N 3rd St	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Columbus	590197165
<b>Title</b>	<b>Date</b>	

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0849	6	Columbus H S	48	HS

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Helena, MT 59620-2501

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0850	9-9	Reed Point Elem	48	EL

**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.

<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	PO Box 338	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Reed Point	59069
<b>Title</b>	<b>Date</b>	

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0851	9-9	Reed Point H S	48	HS

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

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	PO Box 338	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Reed Point	59069
<b>Title</b>	<b>Date</b>	

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PO Box 202501  
Helena, MT 59620-2501

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0852	12-12	Molt Elem	48	EL

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

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<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	PO Box 70	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Molt	59057
<b>Title</b>	<b>Date</b>	

Send completed form to:  
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Helena, MT 59620-2501

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Superintendent  
PO Box 202501  
Helena, MT 59620-2501

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0853	13	Fishtail Elem	48	EL

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<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	PO Box 75	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Fishtail	59028
<b>Title</b>	<b>Date</b>	

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Office of Public Instruction  
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Helena, MT 59620-2501

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Superintendent  
PO Box 202501  
Helena, MT 59620-2501

## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0857	31	Nye Elem	48	EL

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<b>Signature of District Superintendent or Board Chairperson</b>	<b>Street Address or P.O. Box</b>	
	Box 699	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Absarokee	59001
<b>Title</b>	<b>Date</b>	

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0858	32	Rapelje Elem	48	EL

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	PO Box 89	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Rapelje	59067
<b>Title</b>	<b>Date</b>	

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Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0859	32	Rapelje H S	48	HS

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0861	52-C	Absarokee Elem	48	EL

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	327 S Woodard Ave	
<b>Printed Name of Authorized Official</b>	<b>City</b>	<b>Zip Code</b>
	Absarokee	59001
<b>Title</b>	<b>Date</b>	

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## CERTIFICATION FOR INDIRECT COST RATE

For FY 2008-2009

Due April 30, 2008

Legal Entity #	School Dist. #	School Name	County	Level
0862	52	Absarokee H S	48	HS

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