



Office of Public Instruction
Denise Juneau,
Superintendent
PO Box 202501
Helena, MT 59620-2501

CERTIFICATION FOR INDIRECT COST RATE

For FY 2010-2011

Due April 30, 2010

| 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 FY2011 | Date Approved |
| | Signature |



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

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

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| | | |
|--|-----------------------------------|-----------------|
| 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 | |
| | | |

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|-----------------------|-----------------------|--------------------|---------------|--------------|
| Legal Entity # | School Dist. # | School Name | County | Level |
| 0527 | 13 | Eureka Elem | 27 | EL |

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

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|----------------|----------------|--------------------|--------|-------|
| 0528 | CO | Lincoln County H S | 27 | HS |

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

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

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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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|----------------|----------------|----------------|--------|-------|
| 0530 | 15 | McCormick Elem | 27 | EL |

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| | | |
|--|-----------------------------------|-----------------|
| Signature of District Superintendent or Board Chairperson | Street Address or P.O. Box | |
| | 1564 Old Highway 2 North | |
| Printed Name of Authorized Official | City | Zip Code |
| | Troy | 59935 |
| Title | Date | |
| | | |

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| 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 | |
| | 29893 Yaak River Road | |
| Printed Name of Authorized Official | City | Zip Code |
| | Troy | 59935 |
| Title | Date | |
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For FY 2010-2011

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| 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 |
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