CALIFORNIA AID TO AIRPORTS PROGRAM (CAAP)- ANNUAL CREDIT DISBURSEMENT REQUEST

DOA-0009 (REV 06/2011)

	PA	RT I. REQUEST F	FOR DISBURSEM	ENT	të.	ži.
The City of Salinas						(Public Entity)
requests \$ 50,000.00 from the account of Salinas Municipal Airport						(Airport Name)
for expenditure solely	on this airport during	the fiscal year of $\frac{201}{}$	8/2019	_·		
SIGNATURE (Airport Manager) PHONE (831) 758-7214						14
Reimbursement for the	following expenditures is	s requested:				
\$ 35,000.00	00.00 Item: Economic Impact Study					
\$ 15,000.00	Item: Runway 26 and Heliport Design Bid Package					
\$	Item:					
\$	Item:					
\$	Item:					
Attach additional sheets	s if needed					
	at the public entity	will expend the re	AL CERTIFICATION quested funds purve stated purposes	suant t	o Public Uti	lities Code
SIGNATURE (Finance Officer)			DATE Febraury 22, 2019			
PRINT NAME Matt Pressey BUSINESS ADDRESS			TITLE Finance Director BUSINESS PHONE			
200 Lincoln Ave Salinas, CA 93901			(831) 758-7420			
FOR AERONAUTICS USE ONLY				DATE		
FISCAL INFORMATION		F.Y.	AMOUNT	F.Y.		AMOUNT
F.Y.	AMOUNT	F.Y.	AMOUNT	F.Y.		AMOUNT

Send Original Completed and Signed Request to:

CALIFORNIA DEPARTMENT OF TRANSPORTATION
DIVISION OF AERONAUTICS - MS #40
P.O. BOX 942874

SACRAMENTO, CA 94274-0001