DMR Copy of Record

Permit					
Permit #:	**INP000627**	**Permittee:**	MATERIAL HANDLING EXCHANGE, INC.	**Facility:**	MATERIAL HANDLING EXCHANGE, INC.
Major:	No	**Permittee Address:**	1800 CHURCHMAN AVE INDIANAPOLIS, IN 46203	**Facility Location:**	1001 N HURRICANE ST FRANKLIN, IN 46131
Permitted Feature:	001 External Outfall	**Discharge:**	**001-A** 001 POWDER COAT METAL PARTS - TO FRANKLIN POTW		
Report Dates & Status					
Monitoring Period:	**From 10/01/21 to 10/31/21**	**DMR Due Date:**	**11/28/21**	**Status:**	**NetDMR Validated**
Considerations for Form Completion					
THE FLOW MUST BE MEASURED USING VALID FLOW MEASUREMENT DEVICES. PRETREATMENT TO FRANKLIN POTW JOHNSON COUNTY					
Principal Executive Officer					
First Name:	Jennifer	**Title:**	Director of Operations	**Telephone:**	131-751-3165
Last Name:	Fortune				
No Data Indicator (NODI)					
Form NODI:	--				

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	6.57			=	7.23	12 - SU		01/01 - Daily	GR - GRAB
					Permit Req.						>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU		01/01 - Daily	GR - GRAB
					Value NODI															
00720	**Cyanide, total [as CN]**	1 - Effluent Gross	0	--	Sample								=	0.01	=	0.01	19 - mg/L		01/30 - Monthly	GR - GRAB
					Permit Req.								<=	0.65 MO AVG	<=	1.2 DAILY MX	19 - mg/L		01/30 - Monthly	GR - GRAB
					Value NODI															
01074	**Nickel, total recoverable**	1 - Effluent Gross	0	--	Sample								=	0.06	=	0.06	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	2.38 MO AVG	<=	3.98 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01079	**Silver total recoverable**	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01094	**Zinc, total recoverable**	1 - Effluent Gross	0	--	Sample								=	0.04	=	0.04	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.48 MO AVG	<=	2.61 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01113	**Cadmium, total recoverable**	1 - Effluent Gross	0	--	Sample								<	0.005	<	0.005	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01114	**Lead, total recoverable**	1 - Effluent Gross	0	--	Sample								<	0.01	<	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	0.43 MO AVG	<=	0.69 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01118	**Chromium, total recoverable**	1 - Effluent Gross	0	--	Sample								=	0.01	=	0.01	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
01119	**Copper, total recoverable**	1 - Effluent Gross	0	--	Sample								=	0.14	=	0.14	19 - mg/L		01/30 - Monthly	24 - COMP24
					Permit Req.								<=	2.07 MO AVG	<=	3.38 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI															
50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Sample	=	0.003657	=	0.011969	03 - MGD									01/01 - Daily	TM - TOTALZ
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									01/01 - Daily	TM - TOTALZ
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

Name	Type	Size

INP000627_001A_MMR_2021_10.pdf	pdf	107238.0
Analytical_20211108_095248.pdf	pdf	1260791.0

Report Last Saved By	
MATERIAL HANDLING EXCHANGE, INC.	
User:	JONAMATO
Name:	Jonathan amato
E-Mail:	jonamato@m-h-e.com
Date/Time:	2021-12-01 16:00 (Time Zone: -05:00)
Report Last Signed By	
User:	JONAMATO
Name:	Jonathan amato
E-Mail:	jonamato@m-h-e.com
Date/Time:	2021-12-01 16:25 (Time Zone: -05:00)

DMR Copy of Record

Permit					
Permit #:	**INP000627**	**Permittee:**	MATERIAL HANDLING EXCHANGE, INC.	**Facility:**	MATERIAL HANDLING EXCHANGE, INC.
Major:	No	**Permittee Address:**	1800 CHURCHMAN AVE INDIANAPOLIS, IN 46203	**Facility Location:**	1001 N HURRICANE ST FRANKLIN, IN 46131
Permitted Feature:	002 External Outfall	**Discharge:**	**002-A** 002 POWDER COAT METAL PARTS - TO FRANKLIN POTW		
Report Dates & Status					
Monitoring Period:	**From 10/01/21 to 10/31/21**	**DMR Due Date:**	**11/28/21**	**Status:**	**NetDMR Validated**
Considerations for Form Completion					
THE FLOW MUST BE MEASURED USING VALID FLOW MEASUREMENT DEVICES. PRETREATMENT TO FRANKLIN POTW JOHNSON COUNTY					
Principal Executive Officer					
First Name:	Jennifer	**Title:**	Director of Operations	**Telephone:**	131-751-3165
Last Name:	Fortune				
No Data Indicator (NODI)					
Form NODI:	--				

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration						# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00400	**pH**	1 - Effluent Gross	0	--	Sample															
					Permit Req.						>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU		01/01 - Daily	GR - GRAB
					Value NODI							C - No Discharge				C - No Discharge				
00720	**Cyanide, total [as CN]**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	0.65 MO AVG	<=	1.2 DAILY MX	19 - mg/L		01/30 - Monthly	GR - GRAB
					Value NODI									C - No Discharge		C - No Discharge				
01074	**Nickel, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	2.38 MO AVG	<=	3.98 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01079	**Silver total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01094	**Zinc, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	1.48 MO AVG	<=	2.61 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01113	**Cadmium, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	0.07 MO AVG	<=	0.11 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01114	**Lead, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	0.43 MO AVG	<=	0.69 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01118	**Chromium, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	1.71 MO AVG	<=	2.77 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
01119	**Copper, total recoverable**	1 - Effluent Gross	0	--	Sample															
					Permit Req.								<=	2.07 MO AVG	<=	3.38 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
					Value NODI									C - No Discharge		C - No Discharge				
50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Sample															
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									01/01 - Daily	TM - TOTALZ
					Value NODI		C - No Discharge		C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

Name	Type	Size

INP000627_002A_MMR_2021_10.pdf	pdf	104670.0
Report Last Saved By		
MATERIAL HANDLING EXCHANGE, INC.		
User:	JONAMATO	
Name:	Jonathan amato	
E-Mail:	jonamato@m-h-e.com	
Date/Time:	2021-12-01 15:47 (Time Zone: -05:00)	
Report Last Signed By		
User:	JONAMATO	
Name:	Jonathan amato	
E-Mail:	jonamato@m-h-e.com	
Date/Time:	2021-12-01 15:47 (Time Zone: -05:00)	

WATER & WASTEWATER LABORATORIES, INC.

Client: Material Handling Exchange, Inc.
Address: 1800 Churchman Ave
Indianapolis, IN 46203
Attention: Jonathan Amato

Report Date: November 8, 2021
P.O. #: verbal

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Henry Street Steel wastewater effluent composite	10/22/21	10/27/21	**21-4317**
#2	Henry Street Steel wastewater effluent grab	10/22/21	10/27/21	**21-4318**
#3				
#4				
#5				

Parameter	#1	#2	#3	#4	#5	Units	Method	PQL
Total Metals						-	200.2	-
Cadmium	<0.005	-				mg/L	200.7	0.005
Chromium, total	0.01	-				mg/L	200.7	0.01
Copper	0.14	-				mg/L	200.7	0.01
Lead	<0.01	-				mg/L	200.7	0.01
Nickel	0.06	-				mg/L	200.7	0.01
Silver	<0.005	-				mg/L	200.7	0.005
Zinc	0.04	-				mg/L	200.7	0.01
Total Cyanide	-	0.01				mg/L	4500CN C/E	0.02

Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm)
Std = Standard pH units, ng/L = nanograms per liter (ppt), < = less than (not detected, below listed value)
< = less than (not detected, below listed value), > = greater than (higher than listed value)

Analysis Certified By: John Ondo (RLK) Laboratory Manager
John Ondo

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • FAX (216) 696-6831

WATER & WASTEWATER LABORATORIES, INC.

Client: Material Handling Exchange, Inc.
Address: 1800 Churchman Ave
Indianapolis, IN 46203
Attention: Jonathan Amato

Report Date: November 8, 2021
P.O. #: verbal

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Henry Street Steel wastewater effluent composite	10/22/21	10/27/21	21-4317
#2	Henry Street Steel wastewater effluent grab	10/22/21	10/27/21	21-4318
#3				
#4				
#5				

Analytical Batch QA/QC Data	LCS % recovery	Method Blank mg/L	Matrix Spike (MS) % recovery	Matrix Duplicate Spike (MSD) % recovery	Matrix Duplicate Sample (Dup) % Deviation	Test Method	Analyst	Date Analyzed
Total Metals						200.2	RK	10/31/2021
Cadmium	102	<0.005	106	-	0	200.7	RK	11/2/2021
Chromium, total	100	<0.01	107	-	8	200.7	RK	11/2/2021
Copper	102	<0.01	109	-	4	200.7	RK	11/2/2021
Lead	95	<0.01	98	-	0	200.7	RK	11/2/2021
Nickel	102	<0.01	102	-	3	200.7	RK	11/2/2021
Silver	98	<0.005	98	-	0	200.7	RK	11/2/2021
Zinc	98	<0.01	108	-	2	200.7	RK	11/2/2021
Total Cyanide	95	<0.01	100	-	0	4500CN C/E	JO	11/2/2021

Unit Desc: mg/L = milligrams per liter (ppm), ug/L = micrograms per liter (ppb), mg/Kg = milligrams per Kilograms (ppm)
Std = Standard pH units, < = less than (not detected, below listed value), > = greater than (higher than listed value)
PQL=Practical Quantitation Limit, minimum detection limit. ND= Not Detected, result is below the detection limit.

Analysis Certified By: John Ondo (RLK) Laboratory Manager
John Ondo

2779 Rockefeller Avenue • Cleveland, Ohio 44115 • (216) 696-0280 • FAX (216) 696-6831

Sample Chain of Custody Record

Site Name: Material Handling Exchange, Inc.
Site Address: 1001 Hurricane Road, Franklin, IN 46131

Sample chilled/iced: Yes [X] No [ ]
Temp (C): 9c
Project Name:

Water & Wastewater Laboratories, Inc.
2779 Rockefeller Avenue
Cleveland, Ohio 44115
Phone:(216)696-0280
Fax:(216)696-6831

Sample Date	Sample Time	Comp.	Grab	Sample Location/site ID	Number of Containers	Plastic 8oz w/HNO3 7 Metals	Plastic 8oz w/NaOH Total Cyanide	Sample Comments	Lab #
10-22-21	8am-4pm	X		Wastewater Effluent	1	X		**For Composite:** a sample was collected every 60 minutes for a total of 8 hours	21-4317
10-22-21	12pm		X	Wastewater Effluent	1		X		21-4318

Frenquency = 1/month

TTO = 1/6months

Sampler(s) [print name(s)-sign below]: Jeremy Baughman

Relinquished by	Date/Time	Received by
Relinquished by: *(sampler signature)* Jeremy Baughman	Date/Time: 10-22-21	Received by: *(signature or shipper)* UPS
Relinquished by: *(signature)* UPS	Date/Time: 10/27/21 2pm	Received by: *(signature or shipper)* A Fontanez (LAB
Relinquished by: *(signature)*	Date/Time:	Received by: *(signature or shipper)*
Relinquished by: *(signature)*	Date/Time:	Received by: *(signature or shipper)*

Report to: **Nick Lawrence**
Material Handling Exchange, Inc.
1800 Churchman Ave
Indianapolis, IN 46203

Phone:
Fax:
P.O.#:
Bill to:

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:
Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin, Indiana

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.
THIS REPORT MUST BE POSTMARKED NO LATER THAN THE 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management
Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

E-mail address: jonamato@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	1	
OUTFALL NO.			

1	0	2	1
MO.		YR.	

No Discharge
This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		CYANIDE, TOTAL (CN)		NICKEL, TOTAL (NI)		SILVER, TOTAL (Ag)	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C 00720	Q	C01074	Q	C01079
SAMPLE TYPE	Permit Condition	24TOT	GRAB			GRAB		COMP		COMP
	Monitored	24TOT	GRAB			GRAB		COMP		COMP
FREQUENCY	Permit Condition	DAILY	METER			MONTHLY		MONTHLY		MONTHLY
	Monitored	DAILY	MONTHLY			MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0		N/A	N/A	N/A	N/A	N/A	N/A
	Permit Average	REPORT	N/A			0.65		2.38		0.24
	Permit Maximum	REPORT	10.0			1.20		3.98		0.43
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Fri	1	0.007911	7.22	7.22						
Sat	2	0.000000	na	na						
Sun	3	0.000000	na	na						
Mon	4	0.001842	7.08	7.08						
Tue	5	0.005323	7.01	7.01						
Wed	6	0.006019	6.74	6.74						
Thu	7	0.006075	6.92	6.92						
Fri	8	0.006153	6.90	6.90						
Sat	9	0.000000	na	na						
Sun	10	0.000000	na	na						
Mon	11	0.005728	7.15	7.15						
Tue	12	0.006304	7.01	7.01						
Wed	13	0.004383	7.23	7.23						
Thu	14	0.005411	6.98	6.98						
Fri	15	0.006863	7.06	7.06						
Sat	16	0.000000	na	na						
Sun	17	0.000000	na	na						
Mon	18	0.011969	7.04	7.04						
Tue	19	0.006764	6.88	6.88						
Wed	20	0.005428	6.67	6.67						
Thu	21	0.010094	6.91	6.91						
Fri	22	0.005348	6.57	6.57		0.01		0.06		<0.005
Sat	23	0.000000	na	na						
Sun	24	0.000000	na	na						
Mon	25	0.002528	6.75	6.75						
Tue	26	0.003125	6.70	6.70						
Wed	27	0.002454	6.85	6.85						
Thu	28	0.001852	6.82	6.82						
Fri	29	0.001804	6.85	6.85						
Sat	30	0.000000	na	na						
		0.000000	na	na						
MONTHLY AVERAGE		0.003657				0.01		0.06		#DIV/0!
HIGHEST VALUE		0.011969	7.23			0.01		0.06		0
LOWEST VALUE		0.000000	6.57			0.01		0.06		0
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0.113378								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Prepared by or under the direction of (Certified Operator):

Date (month, day, year): 10/22/2021

Preparer's telephone number: 317 446 0935

Operator's certification number:

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement): Jon Amato

Date (month, day, year): 12/1/2021

MONTHLY MONITORING REPORT (MMR) FOR INDUSTRIAL DISCHARGE PERMITS

Indiana Discharge Monitoring Report

State Form 30530 (R3 / 3-14)

FACILITY NAME AND ADDRESS:
Material Handling Exchange, Inc.
1001 Hurricane Street
Franklin, Indiana

PLEASE COMPLETE AND SUBMIT ONE COPY EACH MONTH.
THIS REPORT MUST BE POSTMARKED NO LATER THAN THE 28TH OF THE FOLLOWING MONTH.

Mail To: Indiana Department of Environmental Management
Office of Water Quality, Mail Code 65-42
100 North Senate Avenue
Indianapolis, Indiana 46204-2251

E-mail address: jonamato@m-h-e.com

I	N	P	0	0	0	6	2	7
PERMIT NUMBER								

0	0	2	
OUTFALL NO.			

1	0	2	1
MO.		YR.	

No Discharge X

This is a revised submittal

EFFLUENT CHARACTERISTICS		FLOW	pH		CYANIDE, TOTAL (CN)		NICKEL, TOTAL (NI)		SILVER, TOTAL (Ag)	
EFFLUENT PARAMETER NUMBER		Q50050	C00400		Q	C 00720	Q	C01074	Q	C01079
SAMPLE TYPE	Permit Condition	24TOT	GRAB			GRAB		COMP		COMP
	Monitored	24TOT	GRAB			GRAB		COMP		COMP
FREQUENCY	Permit Condition	DAILY	METER			MONTHLY		MONTHLY		MONTHLY
	Monitored	DAILY	MONTHLY			MONTHLY		MONTHLY		MONTHLY
EFFLUENT LIMITATIONS	Permit Minimum	N/A	5.0		N/A	N/A	N/A	N/A	N/A	N/A
	Permit Average	REPORT	N/A			0.65		2.38		0.24
	Permit Maximum	REPORT	10.0			1.20		3.98		0.43
UNITS =		MGD	HI	LOW	LB/DAY	MG/L	LB/DAY	MG/L	LB/DAY	MG/L
Fri	1	0.000000	No Discharge							
Sat	2	0.000000	No Discharge							
Sun	3	0.000000	No Discharge							
Mon	4	0.000000	No Discharge							
Tue	5	0.000000	No Discharge							
Wed	6	0.000000	No Discharge							
Thu	7	0.000000	No Discharge							
Fri	8	0.000000	No Discharge							
Sat	9	0.000000	No Discharge							
Sun	10	0.000000	No Discharge							
Mon	11	0.000000	No Discharge							
Tue	12	0.000000	No Discharge							
Wed	13	0.000000	No Discharge							
Thu	14	0.000000	No Discharge							
Fri	15	0.000000	No Discharge							
Sat	16	0.000000	No Discharge							
Sun	17	0.000000	No Discharge							
Mon	18	0.000000	No Discharge							
Tue	19	0.000000	No Discharge							
Wed	20	0.000000	No Discharge							
Thu	21	0.000000	No Discharge							
Fri	22	0.000000	No Discharge							
Sat	23	0.000000	No Discharge							
Sun	24	0.000000	No Discharge							
Mon	25	0.000000	No Discharge							
Tue	26	0.000000	No Discharge							
Wed	27	0.000000	No Discharge							
Thu	28	0.000000	No Discharge							
Fri	29	0.000000	No Discharge							
Sat	30	0.000000	No Discharge							
		0.000000	No Discharge							
MONTHLY AVERAGE						#DIV/0!		#DIV/0!		#DIV/0!
HIGHEST VALUE						0.00		0		0
LOWEST VALUE						0.00		0		0
NO. OF TIMES WEEKLY, DAILY, MONTHLY EFFL. LIMITATIONS EXCEEDED		0	0			0		0		0
TOTAL FLOW		0.000000								

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Prepared by or under the direction of (Certified Operator):

Date (month, day, year): 10/22/2021

Preparer's telephone number: 3174460935

Operator's certification number:

Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement): jon amato

Date (month, day, year): 12/1/2021