DMR Copy of Record

Permit

Permit #: INP000627

Permittee: MATERIAL HANDLING EXCHANGE, INC.

Major: No

Permittee Address: 1800 CHURCHMAN AVE

INDIANAPOLIS, IN 46203

Facility Locat

Facility:

MATERIAL HANDLING EXCHANGE, INC.

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 11/01/21 to 11/30/21

Fortune

DMR Due Date: 12/28/21

Status: NetDMR Validated

Considerations for Form Completion

THE FLOW MUST BE MEASURED USING VALID FLOW MEASUREMENT DEVICES. PRETREATMENT TO FRANKLIN POTW JOHNSON COUNTY

Title:

Principal Executive Officer

First Name: Jennifer

Director of Operations

Telephone: 317-446-0435

No Data Indicator (NODI)

Last Name:

Form NODI:

	Parameter	Param. NODI									Qualit	y or Concen	tration		;	# 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		
					Sample							6.76					12 - SU	01/01 - Daily	GR - GRAB
00400	pH	1 - Effluent Gross	0		Permit Req.						>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU	01/01 - Daily	GR - GRAB
					Value NODI														
					Sample								=	0.1	=	0.1	19 - mg/L	01/30 - Monthly	GR - GRAB
00720	Cyanide, total [as CN]	1 - Effluent Gross	0		Permit Req.									0.65 MO AV		1.2 DAILY MX	-	01/30 - Monthly	GR - GRAB
00720	Cyanide, total [as Civ]	1 - Lilidelli Gioss	U		Value NODI														
					Sample								=	0.05	=	0.05	19 - mg/L	01/30 - Monthly	24 - COMP24
01074	Nickel, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	2.38 MO AV	G <=	3.98 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
01071	Thomas, total 1000101abib	. Lindom Grood			Value NODI														
					Sample								<	0.005	<	0.005	19 - mg/L	01/30 - Monthly	24 - COMP24
01070	Silver total recoverable	1 - Effluent Gross	0		Permit Req.								<=	0.24 MO AV	G <=	0.43 DAILY MX	-	01/30 - Monthly	24 - COMP24
01073	Oliver total recoverable	1 - Ellidelli Gloss	0		Value NODI														
					Sample								=	0.04	=	0.04	19 - mg/L	01/30 - Monthly	24 - COMP24
01094	Zinc, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	1.48 MO AV	G <=	2.61 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI														
					Sample								<	0.005	<	0.005	19 - mg/L	01/30 - Monthly	24 - COMP24
01113	Cadmium, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	0.07 MO AV	S <=	0.11 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
	, , , , , , , , , , , , , , , , , , , ,				Value NODI														
					Sample								<	0.01	<	0.01	19 - mg/L	01/30 - Monthly	24 - COMP24
01114	Lead, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	0.43 MO AV	G <=	0.69 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
	,				Value NODI														
					Sample								<	0.01	<	0.01	19 - mg/L	01/30 - Monthly	24 - COMP24
01118	Chromium, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	1.71 MO AV	S <=	2.77 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI														
					Sample								=	0.14	=	0.14	19 - mg/L	01/30 - Monthly	24 - COMP24
01119	Copper, total recoverable	1 - Effluent Gross	0		Permit Req.								<=	2.07 MO AV	} <=	3.38 DAILY MX	19 - mg/L	01/30 - Monthly	24 - COMP24
					Value NODI														
					Sample	= 0	0.002553	= 0.017	7715	03 - MGD								01/01 - Daily	TM - TOTALZ
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0		Permit Req.	F	Req Mon MO AVG	Req I	Mon DAILY MX	03 - MGD								01/01 - Daily	TM - TOTALZ
					Value NODI														
					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 Siz

Analytical_20211213_095955.pdf pdf 1160541.0 INP000627_001A_MMR_2021_11.pdf pdf 107498.0 Report Last Saved By MATERIAL HANDLING EXCHANGE, INC. User: JONAMATO Name: Jonathan amato E-Mail: jonamato@m-h-e.com Date/Time: 2021-12-28 15:39 (Time Zone: -05:00) Report Last Signed By User: JONAMATO Name: Jonathan amato

jonamato@m-h-e.com

2021-12-28 15:39 (Time Zone: -05:00)

E-Mail:

Date/Time:

DMR Copy of Record

Permit		

Permit #: INP000627 Permittee: MATERIAL HANDLING EXCHANGE, INC.

Major: No **Permittee Address:** 1800 CHURCHMAN AVE

INDIANAPOLIS, IN 46203

Facility Location:

MATERIAL HANDLING EXCHANGE, INC.

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 11/01/21 to 11/30/21

Fortune

DMR Due Date: 12/28/21 Status:

Facility:

NetDMR Validated

Considerations for Form Completion

THE FLOW MUST BE MEASURED USING VALID FLOW MEASUREMENT DEVICES. PRETREATMENT TO FRANKLIN POTW JOHNSON COUNTY

Title:

Principal Executive Officer

First Name: Jennifer **Director of Operations**

Telephone:

317-446-0935

No Data Indicator (NODI)

Last Name:

Form NODI:

	Parameter	Monitoring Location Seas	on # Param. NOD	DI	Quantity or Loading					Quality or Concentration					# of Ex. F	is 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	рН	1 - Effluent Gross 0		Sample Permit Req					>=	5.0 DAILY MN			<=	10.0 DAILY MX	12 - SU	C	01/01 - Daily	GR - GRAB
	F**			Value NOD	ı					C - No Discharge				C - No Discharge				
				Sample Permit Req							<=	0.65 MO AVG	<=	1.2 DAILY MX	19 - mg/L	C	01/30 - Monthly	GR - GRAB
00720	Cyanide, total [as CN]	1 - Effluent Gross 0		Value NOD								C - No Discharge		C - No Discharge	10 mg/L		1700 Monany	OK OIUE
				Sample								2 22 140 11/0		O OO DAH WAAV	10 (1			24 2011024
01074	Nickel, total recoverable	1 - Effluent Gross 0		Permit Req							<=	2.38 MO AVG C - No Discharge	<=	3.98 DAILY MX C - No Discharge	19 - mg/L	0	01/30 - Monthly	24 - COMP24
				Sample	•							C 140 Districting		O 140 Distinarge				
01079	Silver total recoverable	1 - Effluent Gross 0		Permit Req							<=	0.24 MO AVG	<=	0.43 DAILY MX	19 - mg/L	. 0	01/30 - Monthly	24 - COMP24
				Value NOD	ı							C - No Discharge	•	C - No Discharge				
04004	70 (stal assessment)	A Effluent Organ		Sample Permit Req							<=	1.48 MO AVG	<=	2.61 DAILY MX	19 - mg/L	C	01/30 - Monthly	24 - COMP24
01094	Zinc, total recoverable	1 - Effluent Gross 0		Value NOD								C - No Discharge		C - No Discharge			,	
				Sample Permit Req								0.07 MO AVG		0.11 DAILY MX	10/		01/30 - Monthly	24 - COMP24
01113	Cadmium, total recoverable	1 - Effluent Gross 0		Value NOD							<=	C - No Discharge		C - No Discharge	19 - mg/L	U	1/30 - Monthly	24 - COMP24
				Sample										_				_
01114	Lead, total recoverable	1 - Effluent Gross 0		Permit Req							<=	0.43 MO AVG			19 - mg/L	0	01/30 - Monthly	24 - COMP24
				Value NOD	1							C - No Discharge	1	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	. C	01/30 - Monthly	24 - COMP24
00	omoman, total rosororable	. Imagin Grees		Value NOD	ı							C - No Discharge		C - No Discharge				
				Sample Permit Req		_					<=	2.07 MO AVG	<=	3.38 DAILY MX	19 - mg/L		01/30 - Monthly	24 - COMP24
01119	Copper, total recoverable	1 - Effluent Gross 0		Value NOD								C - No Discharge		C - No Discharge	13 - IIIg/L	0	1700 WOTHIN	24 - OOMI, 24
				Sample														
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross 0		Permit Req		Req Mon MO AVG		teq Mon DAILY MX	03 - MGD							0	01/01 - Daily	TM - TOTALZ
				Value NOD	I	C - No Discharg	ge	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

INP000627_002A_MMR_2021_11.pdf 92398.0

Report Last Saved By

MATERIAL HANDLING EXCHANGE, INC.

User: JONAMATO

Name: Jonathan amato

Report Last Signed By

E-Mail:

Date/Time:

User: JONAMATO

Name: Jonathan amato

E-Mail: jonamato@m-h-e.com

Date/Time: 2021-12-28 15:25 (Time Zone: -05:00)

jonamato@m-h-e.com

2021-12-28 15:24 (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: December 13, 2021

P.O. #: verbal

page 1 of 2

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Henry Street Steel wastewater effluent composite	12/2/21	12/7/21	21-4927
#2	Henry Street Steel wastewater effluent grab	12/2/21	12/7/21	21-4928
#3				
#4				
#5				

Parameter	#1	#2	#3	#4	#5	Units	Method	PQL
Γotal Metals						#	200.2	-
Cadmium	< 0.005	-:				mg/L	200.7	0.005
Chromium, total	< 0.01	-	The Paris Control of the Control of			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	0.05	- ,				mg/L	200.7	0.01
Silver	< 0.005	-				mg/L	200.7	0.005
Zinc	0.04	-	Canada Callant I or y			mg/L	200.7	0.01
Total Cyanide	-	0.10				mg/L	4500CN C/E	0.02
				z	CAST VI AND SAFET VIANT			
			And the second second		al promorphism			

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:	// · / (QV)	Laboratory Manager
	John Ondo	



WATER & WASTEWATER LABORATORIES, INC.

Client: Material Handling Exchange, Inc.

Address: 1800 Churchman Ave

Indianapolis, IN 46203

Attention: Jonathan Amato

Report Date: December 13, 2021

P.O. #: verbal

page 2 of 2

Column #	Sample Description	Sample Date	Recd. Date	Sample #
#1	Henry Street Steel wastewater effluent composite	12/2/21	12/7/21	21-4927
#2	Henry Street Steel wastewater effluent grab	12/2/21	12/7/21	21-4928
#3	•	T. S. D. STREETSCHELD, D. J. J. Britanistanistanis (1) a Section of the Computation of th	12,7,72	21 4020
#4				
#5	property and the contract of t			

	Method	Matrix Spike	IVIALITY L	Duplicate			
LCS % recovery	Blank mg/L	(MS) % recovery	Spike (MSD) % recovery	Sample (Dup) % Deviation	Test Method	Analyst	12/8/2021 12/11/2021 12/11/2021 12/11/2021 12/11/2021 12/11/2021 12/11/2021 12/11/2021
					200.2	RK	
95	<0.005	95	-	0	200.7	RK	12/11/2021
96	< 0.01	93	-	0	200.7	RK	12/11/2021
106	< 0.01	98	-	0	200.7	RK	
100	<0.01	97	-	0	200.7	RK	
105	< 0.01	99	=	0	200.7	RK	12/11/2021
100	<0.005	96	-	0	200.7	RK	12/11/2021
100	<0.01	98	-	0	200.7	RK	12/11/2021
87	<0.02	82	-	0	4500CN C/E	CJ	12/8/2021
					M TIER CONTRACTOR OF THE CONTRACTOR OF T		
	95 96 106 100 105 100	% recovery mg/L 95 <0.005	% recovery mg/L % recovery 95 <0.005	% recovery mg/L % recovery % recovery 95 <0.005	% recovery mg/L % recovery % recovery % Deviation 95 <0.005	% recovery mg/L % recovery % recovery % Deviation Method 95 <0.005	% recovery mg/L % recovery % recovery % Deviation Method Analyst 200.2 RK 95 < 0.005

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:

Laboratory Manager

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

ohn Ondo

Sample Chain of Custody Record

	rax: re or shipper) P.O.#: Bill to: we or shipper)	Received by: (signature or shipper) Received by: (signature or shipper)	Date/Time:	Relinquished by: (signature) Relinquished by: (signature)	Relinquished
	griphth)	Received by: (signature or shippy	Date/Time:	by: (signame)	Relinquished by:
Material Handling Exchange, Inc. 1800 Churchman Ave Indianapolis, IN 46203	e or shipper)	Received by: (signature or shipper)	Date/Time:	by: (sampler signature)	Relinquished by
Report to: Nick Lawrence	Report to	, mark s		Sampler(s) [print name(s)-sign below]:	Sampler(s) [pri
TTO = 1/6months					
Frenquency = 1/month		- The same			
				,	
					760 - 10 - 10
for a total of S hours					
60 minutes 21, 49	×	_	Wastewater Effluent	//am x	12-2-21
was collected every 2/49	×		Wastewater Effluent	Jan Spm X	12-2-2
Sample Comments Lab #	7 Metals	Numb	Sample Location/site ID	Sample Time Comp. Grab	Sample Date
Cleveland, Ohio 44115 Phone: (216)696-0280 Fax: (216)696-6831	oz w/HNO3 oz w/NaOH anide	per of Conta	Project Name:	Franklin, IN 46131	Site Address:
Water & Wastewater Laboratories, Inc. 2779 Rockefeller Avenue	Analysis / Preservative	Yes	Sample chilled/ic	Material Handling Exchange, Inc.	Site Name:

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

							Indianapolis, Indiana 46204-2251 E-mail address: ionamato@m-h-e.com										
										E-ma	il address	S:	jonar	nato@	<u> </u>	.com	
I	N	Р	0	0	0	6 2	7	1	0 0	1		1	1	2	1	i	
		-	PERM	IT NUMI	BER		•	1	OUTFA	LL NO.	7 [M	O.	,	YR.	i	_
								_			_						charge
														This i	s a revise	ed sub	omittal
EFFL	UENT	CHARA	CTERIST	ICS		FLOW	р	Н	CYANIDE,	TOTAL (CN)	NIC	KEL, T	ΓΟΤΑL	(NI)	SIL	VER,	TOTAL (Ag)
			1ETER NU	IMBER		Q50050	C00	0400	Q	C 00720	Q		C0107	' 4	Q		C01079
SAMF	PLE TY	/PE	Permit (Condition	า	24TOT	GRAB			GRAB			COMF)			COMP
			Monitor	ed		24TOT	GRAB			GRAB			COMF)			COMP
FREQ	UENC	Y	Permit (Condition	า	DAILY	METE	R		MONTHLY			MONTHLY				MONTHLY
			Monitor	ed		DAILY	MONT	NTHLY		MONTHLY			MONT	HLY			MONTHLY
EFFL	UENT		Permit N	/linimum	1	N/A		5.0	N/A	N/A	N/A		N/A		N/A		N/A
LIMIT	ATION	IS	Permit A	Average		REPORT	N/A			0.65			2.	.38			0.24
			Permit N	Иахітип	n	REPORT		10.0		1.20			3.	.98			0.43
				UNI	TS =	MGD	HI	LOW	LB/DAY	MG/L	LB/D	PΑΥ	M	G/L	LB/E	DAY	MG/L
			1	Mon	1	0.003280	7.30	7.30									
				Гие	2	0.003340	7.05	7.05									
			\	Ved	3	0.002660	7.06	7.06									
				Гһи	4	0.002647	6.81	6.81							T		
			F	-ri	5	0.002440	7.03	7.03									
				Sat	6	0.000000	NA	NA			L				L		
				Sun	7	0.000000	NA	NA							T		
				Mon	8	0.002369	6.90	6.90									
				Гие	9	0.002158	6.84	6.84			L				I		
			1	Ved	10	0.003325	7.26	7.26									
				Γhu	11	0.002082	6.83	6.83									
			F	ri	12	0.002429	6.76	6.76									
			(Sat	13	0.000000	NA	NA									
			(Sun	14	0.000000	NA	NA									
			N	Mon	15	0.003871	7.09	7.09									
				Гие	16	0.004112	7.08	7.08									
			/	Ned	17	0.002255	6.80	6.80									
				Γhu	18	0.004200	7.12	7.12									
			F	-ri	19	0.002139	6.85	6.85									
				Sat	20	0.000000	NA	NA									
			(Sun	21	0.000000	NA	NA									
			N	Mon	22	0.002248	6.81	6.81									
				Гие	23	0.000000	NA	NA									
			/	Ned	24	0.012343	6.80	6.80									
				Γhu	25	0.000000	NA	NA									
				-ri	26	0.000000	NA	NA									
			- 5	Sat	27	0.000000	NA	NA									
				Sun	28	0.000000	NA	NA									
			N	Mon	29	0.017715	7.14	7.14									
				Гие	30	0.003523	7.25	7.25									
				Γhu	2	0.000000	na	na		0.1			0.0	050			<0.005
		AVERAC	GE			0.002553				0.10			0.	.05		-	#DIV/0!
	EST V					0.017715		30		0.10				.05			0
	EST V					0.000000	6.	76		0.10			0.	.05			0
			LY, DAILY,		Υ	0	1 -	0		0				0			0
			S EXCEE	DED			<u> </u>	_									
TOTA	L FLO	W				0.079136		Prepai	red by or unde	r the direction	of (Certi	fied O	perator):	Date (r	nonth.	, day, year)
I certify	/ under	penalty o	of law that th	nis docum	nent a	nd all attachmen	ıts									/-	10001
I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with															12/2	2/2021	
a system designed to assure that qualified personnel properly							Prenai	rer's telephone	numher			Onera	tor's o	ertificatio	n num	nher	
and evaluate the information submitted. Based on my inquiry of the						ne	ι τοραί	or o tolophone	Hamboi				.01 3 0	, moduo	uil	1001	
and evaluate the information submitted. Based on my inquiry of the persons who manage the system, or those persons directly							047	446 0005									
responsible for gathering the information, the information submitted						ed	317 446 0935										
is to the best of my knowledge and belief, true, accurate, and							Signature of principal executive officer or authorized agent						nt	t Date (month, day, year)			
complete. I am aware that there are significant penalties for							(or attested by NetDMR subscriber agreement)							3,31			
submitting false information, including the possibility of fine and							Jon Amato 12/28/2021						0/2024				
								Jon Amato 12/28/2021						0/2021			
_	prisonment for knowing violations.								Page 1 of 3								

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.

Indiana Department of Environmental Management Mail To:

Office of Water Quality, Mail Code 65-42

100 North Senate Avenue

													mulana	polis, iric	ılarıa 402	204-2251			
I	N	Р	0	0	0	6	2	7	7	0 0	2		1	1	2	1			
			PERN	IIT NUN	MBER				1	OUTF	ALL NO.		М	O.	Υ	R.			
									-			•			•		lo Disc	harge	
															This is	a revise	d subm	nittal	_
EFFLU	JENT C	HARAC	CTERIS	TICS		COP	PER	Т	TO										
EFFLU	JENT P	ARAME	TER N	UMBER	₹	C01	119	C7	8141										
SAMP	LE TYP	E	Permit	Conditi	on	CO	MP	GI	RAB										_
			Monito	red		CO	MP	GI	RAB										
FREQ	UENCY		Permit	Conditi	on	MON	THLY	2X/`	YEAR										_
			Monito	red		MON	THLY	2X/`	YEAR										_
EFFLU	JENT		Permit	Minimu	ım	N.	/A	١	I/A										
	ATIONS		Permit	Averag	je	2.	07	١	N/A										_
				Maxim		3.	38	2	.13										_
				U	INITS=														_
				Mon	1														_
				Tue	2														_
				Wed	3														_
				Thu	4														
				Fri	5														
				Sat	6														
				Sun	7														
				Mon	8														
				Tue	9														
				Wed	10														
				Thu	11														
	Fri																		
	Sat																		
				Sun	14														
				Mon	15														
				Tue	16														
				Wed	17														
				Thu	18			=											
				Fri	19														
				Sat	20														
				Sun	21														
				Mon	22														
				Tue	23														
				Wed	24														
				Thu	25														
				Fri	26														
				Sat	27					<u> </u>									
				Sun	28														
				Mon	29														_
				Tue	30					1									_
								<u> </u>		 	ļ								
	HLY AV		E					#D	IV/0!										_
	ST VAI							<u> </u>											_
	ST VAL																		_
	TIMES Y				HLY	(0		0										
								Prepa	red by or unde	er the direc	ction of (Ce	rtified Op	perator):	Date (m	onth, c	day, year)		
I certify under penalty of law that this document and all attachments								1								12/2/2	2021		
were prepared under my direction or supervision in accordance with a							<u></u>				-	١					_		
system designed to assure that qualified personne I properly gather							Preparer's telephone number Operator's certification number							er					
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																			
_	-								t of							lav vear)	_		
my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including														iuy, y c ai <i>j</i>					
	-	-			-			J											
	e possibility of fine and imprisonment for knowing violations.								jon amato 12/28/2021								2021		