Airport Name			Location ID		Fiscal Year End	
	Payments to other go	vernment units Please complete	a separate form for eac	ch unit of governme	ent (City, County, State, Federal).	
Name of government entity:					<u> </u>	
Type of Payment	Amount	Type of Pay	ymont	Amount	Type of Payment	Amount
w enforcement	\$	- Impact fees	\$	Amount	Community services	\$
efighting	\$	- Utilities	\$	_	Grandfathered payments	\$
gal services	\$	- Fleet services	\$	_	Land and facility rental	\$
gineering	\$	- Promotion and marketing		_	Parking and sales tax	\$
yor and City Council	\$	- Repayment of contributio	,	_	Aviation fuel tax	\$
neral cost of government	\$	- Repayment of loans	\$	_	Other - Please attach a schedule.	\$
ntral services	\$	- Lobbying fees	\$	_		
yments in lieu of tax	\$	- Ground access projects	\$	-	Total	\$
Department	(morading 3c	ervices provided by AP employees)	Use* Type**	Fair Market	Value Value of In-Kind Services***	Cash Compensati
	narket value, "L" for less than ne tenant pays a portion of t	n fair market value, or "N" for nomina	airport, please enter the		s provided and attach a note describing the	e service.
ompliance with 47107(a) of Title 49 United State				Signature		
e Federal Aviation Administration Authorization form to help the public understand airport finance	es and the			Oigilatule		
e Federal Aviation Administration Authorization form to help the public understand airport finance	es and the					D-4-
ompliance with 47107(a) of Title 49 United State he Federal Aviation Administration Authorization form to help the public understand airport financ of airport-generated revenue.	es and the			Printed Name		Date
e Federal Aviation Administration Authorization form to help the public understand airport finance	es and the			Printed Name		Telephone No.

FAA Form 5100-126