

CERTIFICATION OF COST ALLOCATION PLAN

This is to certify that to the best of my knowledge and belief regarding the cost allocation plan submitted herewith:

- (1) All costs included in this proposal based on the Fiscal Year ended June 30, 2012, to establish cost allocations or billings for use in FY 2014, are allowable in accordance with the requirements of OMB Circular A-87, "Cost Principles for State and Local Governments," and the Federal award(s) to which they apply. Unallowable costs have been adjusted for in allocating costs as indicated in the cost allocation plan.

- (2) All costs included in this proposal are properly allocable to Federal awards on the basis of a beneficial or causal relationship between the expenses incurred and the awards 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. Similar types of costs have been accounted for consistently.

I declare that the foregoing is true and correct to the best of my knowledge.

Governmental Unit: Story County

Signature: _____

Printed Name of Official: _____

Title: _____

Date of Execution: _____