

IN WITNESS WHEREOF, the parties have hereunto set their hands and affixed their seals the day and date herein above written.

GEORGIA DEPARTMENT OF
TRANSPORTATION

LOWNDES COUNTY, GEORGIA

Commissioner (Seal)

Signature Date

Printed Name/Title

ATTEST:

ATTEST:

I attest to the genuineness of the Seal, and I further attest that the above named officer is duly authorized to execute this document.

Treasurer

Signature Date

Printed Name/Title

58-600856
Federal Employer Identification Number