

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

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Commissioner

(Seal)

Signature

Date

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Printed Name/Title

PLACE SEAL HERE

ATTEST:

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Treasurer

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.

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Signature

Date

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Printed Name/Title

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Federal Employer Identification Number