

## NOTICE OF ISSUANCE

Mail to:  
KENTUCKY PRIVATE ACTIVITY BOND ALLOCATION COMMITTEE  
702 Capitol Avenue, Suite 76  
Frankfort, KY 40601  
(502) 564-2924

Issuer Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Contact: \_\_\_\_\_

Notice of Intent No.: \_\_\_\_\_

Confirmation No.: \_\_\_\_\_

Date of Delivery of Bonds: \_\_\_\_\_

Amount of Allocation Per Confirmation: \_\_\_\_\_

Amount of Bonds Issued Requiring Allocation: \_\_\_\_\_

Allocation Differential (if any): \_\_\_\_\_

The undersigned certifies that the bonds referenced above have been issued in accordance with the provisions of Section 146 of the United States Internal Revenue Code of 1986, as amended.

\_\_\_\_\_  
Signature of Bond Counsel

\_\_\_\_\_  
Printed Name of Bond Counsel

\_\_\_\_\_  
Date

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### ISSUANCE CERTIFICATION

The undersigned, Executive Director of the Office of Financial Management, hereby certifies that he is the state official designated by state law as staff to the Kentucky Private Activity Bond Allocation Committee and that the above issue meets the requirements of KRS 103.286 and 200 KAR 15:010 as amended.

Witness my hand this \_\_\_\_\_

\_\_\_\_\_  
Ryan Barrow, Executive Director  
Office of Financial Management