

FINAL REPORT
CERTIFICATE OF COMPLIANCE

Recipient: _____

Project Name: _____

Grant Number: _____

Grant Amount: _____

I, the undersigned, being duly qualified, respectfully, of the _____ (Recipient Name),
in _____ County, State of Montana, do hereby certify that the above-named project
is in full compliance with all of the covenants and conditions set forth in the Agreement identified above between
the _____ (Recipient Name) and the State of Montana, Department of
Natural Resources and Conservation. I understand that any money remaining after the final payment will be
returned to the appropriate accounts at DNRC.

Authorized Recipient Signature

Date