#### NOTICE OF EXEMPTION

Produce

2025 JAN 15 A 10: 20

TO:

Santa Barbara County Clerk of the Board of Supervisors

FROM:

Laguna County Sanitation District

The project or activity identified below is determined to be exempt from further environmental review requirements of the California Environmental Quality Act (CEQA) of 1970, as defined in the State and County Guidelines for the implementation of CEQA.

APN: 113-200-013, 113-210-015, and 113-240-015 Case No.: Not applicable

Location: [Include street address and cross street (if urbanized area)]

**Project Title:** Lease Agreement for the Grazing of Non-Dairy Livestock on Laguna County Sanitation District Property

### **Project Applicant:**

**Project Description**: Renewal of the lease for the grazing of cattle on 542.6 acres of irrigated and non-irrigated Laguna County Sanitation District property with K2 Cattle Company, LLC for the next five years. The land is divided into 4 pastures to provide for cattle rotation. Irrigation is performed by a separate agricultural labor contractor. The pastures are irrigated with District treated recycled water.

Name of Public Agency Approving Project: Laguna County Sanitation District Board of Directors

Name of Person or Entity Carrying Out Project: Laguna County Sanitation District

| Exemp                                   | t Status:                |
|-----------------------------------------|--------------------------|
| *************************************** | Ministerial              |
|                                         | Statutory Exemption      |
| X                                       | Categorical Exemption    |
|                                         | <b>Emergency Project</b> |
| 7                                       | Declared Emergency       |

Cite specific CEQA and/or CEQA Guidelines Section: [cite section number and brief description or title of the exemption] 15301. EXISTING FACILITIES (Class 1) and 15304. MINOR ALTERATIONS TO LAND (Class 4).

**Reasons to support exemption findings**: CEQA Guidelines Section 15301 consists of the operation, repair, maintenance, permitting, leasing, licensing, or minor alteration of existing public or private structures, facilities, mechanical equipment, or topographical features, involving

negligible or no expansion of existing or former use. CEQA Guidelines Section 15304 consists of minor public or private alterations in the condition of land, water, and/or vegetation which do not involve removal of healthy, mature, scenic trees except for forestry or agricultural purposes.

The proposed project represents a renewal of a lease to allow cattle grazing on Laguna County Sanitation District property. Grazing has been conducted on the properties since 1988. The pastures consist of primarily perennial Bermuda grass and non-native annual grasses. One of the pastures (Pasture 5) is within the Conservation Easement recorded in association with the Habitat Conservation Plan (HCP) and Incidental Take Permit (ITP) for the Laguna County Sanitation District's Facilities Construction, Operation, and Maintenance activities. Grazing of this pasture is included in the HCP and the Conservation Easement management plan. The lease includes provisions for compliance with the ITP and HCP and includes specifications for the grazing operation to prevent degradation of the forage or damage to the land.

Consistent with CEQA Guidelines Sections 15301 and 15304, the renewal of the lease would involve continued operation of an existing grazing operation on existing Laguna County Sanitation District property with no expansion of the use and would only result in temporary minor alteration of the vegetation as the pastures are grazed and rotated to prevent overgrazing and no tree removal would occur. Therefore, the project can be found to be categorically exempt from CEQA.

The proposed project does not involve unusual circumstances, including future activities, resulting in or which might reasonably result in significant impacts which threaten the environment. The exceptions to the categorical exemptions pursuant to Section 15300.2 of the State CEQA Guidelines are:

(a) Location. Classes 3, 4, 5, 6, and 11 are qualified by consideration of where the project is to be located – a project that is ordinarily insignificant in its impact on the environment may in a particularly sensitive environment be significant. Therefore, these classes are considered to apply all instances, except where the project may impact on an environmental resource of hazardous or critical concern where designated, precisely mapped, and officially adopted pursuant to law by federal, state, or local agencies.

Except for Pasture 5, the areas proposed for grazing under the renewed lease are not in sensitive areas. Pasture 5 is within the conservation area preserved for California tiger salamander and California red-legged frog under the District's HCP and ITP. The Conservation Area Management Plan and the Lease include provisions to prevent harm to these species through management of the irrigation and grazing. Therefore, this exclusion does not apply.

(b) Cumulative Impact. All exemptions for these classes are inapplicable when the cumulative impact of successive projects of the same type in the same place, over time is significant.

The proposed project is the continuation of grazing that has occurred since 1988. No other projects have or are proposed that would contribute to cumulative impacts. Therefore, this exclusion does not apply.

(c) Significant Effect. A categorical exemption shall not be used for an activity where there is a reasonable possibility that the activity will have a significant effect on the environment due to unusual circumstances.

Except for Pasture 5, the areas proposed for grazing under the renewed lease are not in sensitive areas. Pasture 5 is within the conservation area preserved for California tiger salamander and California red-legged frog under the District's HCP and ITP. The Conservation Area Management Plan and the Lease include provisions to prevent harm to these species through management of the irrigation and grazing. Therefore, continuation of the grazing lease is not expected to result in a significant effect on the environment and this exclusion does not apply.

(d) Scenic Highways. A categorical exemption shall not be used for a project which may result in damage to scenic resources, including but not limited to, trees, historic buildings, rock outcroppings, or similar resources, within a highway officially designated as a state scenic highway. This does not apply to improvements which are required as mitigation by an adopted negative declaration or certified EIR.

The project involves a lease for continued grazing on irrigated and non-irrigated fields and does not affect scenic resources. Therefore, this exemption does not apply.

(e) Hazardous Waste Sites. A categorical exemption shall not be used for a project located on a site which is included on any list compiled pursuant to Section 65962.5 of the Government Code.

The properties involved in the grazing lease are not known to be listed on any hazardous waste site databases. Therefore, this exemption does not apply.

(f) Historical Resources. A categorical exemption shall not be used for a project which may cause a substantial adverse change in the significance of a historical resource.

The project involves a lease for continued grazing on irrigated and non-irrigated fields and does not affect historical resources. Therefore, this exemption does not apply.

Lead Agency Contact Person: Martin Wilder, District Manager Phone #:

| Department/Division Representative: Joddi Leipner, Engineering Environmental Project Leader |
|---------------------------------------------------------------------------------------------|
| <b>Date</b> : October 26, 2024                                                              |
| Acceptance Date:                                                                            |
| Date Filed by County Clerk:                                                                 |
|                                                                                             |

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Notice of Exemption

Page 4



In person only

## 2024 CEQA Transmittal Memorandum

### County of Santa Barbara - Clerk of the Board of Supervisors

105 E. Anapamu St. Room 407 • Santa Barbara • CA • 93101 (805) 568-2240

In FIN send to 'COB CEQA' in CEO Dept

| FUTURE                                                                                                                                                      | (803) 308-2240                                     |             |                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------|-------------------------------------|
| Complete this form when filing a Notice of Determin<br>Environmental Impact Report) or Notice of Exemption                                                  |                                                    | ative Decla | aration,                            |
| A scanned copy of the Department of Fish and Wildl date/time of posting will be emailed to the Lead Age extra copy along with a pre-addressed, stamped enve | ncy and Project Applicant. If you would like       |             |                                     |
| Contact Person                                                                                                                                              |                                                    | Phone       |                                     |
| Kevin Thompson, Joddi Lei                                                                                                                                   | pner                                               | (805        | 803-8756                            |
| Lead Agency                                                                                                                                                 | p                                                  |             | ency Email                          |
| Laguna County Sanitation [                                                                                                                                  | District                                           | _           | intyofsb.org; Jleipner@countyofsb.o |
| Project Title                                                                                                                                               |                                                    |             |                                     |
| Grazing Lease Agreement with K2 Catt                                                                                                                        | le Company, LLC - Fourth and F                     | ifth Sup    | ervisorial District                 |
| Project Applicant                                                                                                                                           | Email                                              | Phone       |                                     |
| Laguna County Sanitation District                                                                                                                           | kethomp@countyofsb.org; amarredondo@countyofsb.org | (805)       | ) 803-8756                          |
| Project Applicant Address                                                                                                                                   | City                                               | State       | Zip                                 |
| 620 West Foster Road                                                                                                                                        | Santa Maria                                        | CA          | 93455                               |
| DOCUM                                                                                                                                                       | IENT BEING FILED:                                  |             |                                     |
| ☐ Notice of Determination - Environmental Impac                                                                                                             | et Report (EIR)                                    |             |                                     |
| □ 2024 Filing Fee                                                                                                                                           |                                                    |             |                                     |
| ☐ Previously Paid (must attach receipt)                                                                                                                     | 341                                                |             |                                     |
| ☐ No Effect Determination (must be attache                                                                                                                  |                                                    |             |                                     |
| Environmental Filing Fees will be collected only                                                                                                            |                                                    |             |                                     |
| ☐ This project has been approved. Date of                                                                                                                   | Approval: Click or tap to enter a date.            |             |                                     |
| ☐ Notice of Determination - Negative Declaration                                                                                                            | n (ND) or Mitigated Negative Declaration (M        | ND)         |                                     |
| □ 2024 Filing Fee                                                                                                                                           |                                                    |             | \$2,916.75                          |
| ☐ Previously Paid (must attach receipt)                                                                                                                     |                                                    |             | \$0.00                              |
| ☐ No Effect Determination (must be attached                                                                                                                 | ed)                                                |             | \$0.00                              |
| Environmental Filing Fees will be collected only                                                                                                            | for projects that are approved. The Applicant      | must attes  | st to the following:                |
| ☐ This project has been approved. Date of                                                                                                                   | Approval: Click or tap to enter a date.            |             |                                     |
| ■ Notice of Exemption                                                                                                                                       |                                                    |             | \$0.00                              |
| County Administrative Handling Fee (required                                                                                                                | for all filings, effective 7/19/18)                |             | \$50.00                             |
|                                                                                                                                                             | *                                                  | TOTA        | AL: \$ 50.00                        |
| PAYMENT METHOD: ALL APPLI                                                                                                                                   | CABLE FEES MUST BE PAID AT THE                     |             |                                     |
| ☐ Cash ☐ Credit ☐ Check #                                                                                                                                   | □ Journal Entry #                                  | JE 027      | 4835                                |

# Journal Entry

2971548 Batch ID: Processed On: Processed By: Document Number: JE - 0274835 Document Description: CEQA fees - Grazing Lease Agreement 1/14/2025 Post On:

Created On: 11/26/2024 3:56:24 PM Created By: Angela Arredondo

# References

Audit Trail:

Cash Type: 1- Interfund

# Accounting

| Equip Depositor Description | Grazing Lease Agreement-CEQA NOE fees |        |
|-----------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--------|
| Depositor                   |                                       |                                       |                                       |                                       |        |
| Equip                       |                                       |                                       |                                       |                                       |        |
| Area                        |                                       |                                       |                                       |                                       |        |
| Act                         | VEHL                                  |                                       |                                       |                                       |        |
| OUnit Proj Act              | 010000                                |                                       |                                       |                                       |        |
| OUnit                       |                                       |                                       |                                       |                                       |        |
| Prog                        | 6400                                  |                                       |                                       | 4020                                  |        |
| Credit Amount Prog          |                                       | 20.00                                 |                                       | 50.00 4020                            | 100.00 |
| Debit Amount                | 50.00                                 |                                       | 50.00                                 |                                       | 100.00 |
| LI Acct                     | 8300                                  |                                       |                                       | 5746                                  | Total  |
|                             | 2810                                  | 0110                                  | 0110                                  | 2710                                  |        |
| Dept                        | 054                                   |                                       |                                       | 012                                   |        |
| Fund                        | 2870                                  | 2870                                  | 1000                                  | 1000                                  |        |
|                             |                                       |                                       |                                       |                                       |        |

## Signatures

| Signed By        | Approval Level  | Department/Agency-Fund Group | Signed On             | Valid |
|------------------|-----------------|------------------------------|-----------------------|-------|
| Angela Arredondo | Fund/Department | 054-Laguna Sanitation        | 11/26/2024 4:22:29 PM | >     |

## State of California - Department of Fish and Wildlife 2025 ENVIRONMENTAL DOCUMENT FILING FEE CASH RECEIPT

| DFW 753.5a (REV. 01/01/25) Previously DFG 753.5a                                                                                                                                                          |                                                    | Print                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Save Save                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
|                                                                                                                                                                                                           |                                                    | RECEIPT NUM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | RED:                             |
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|                                                                                                                                                                                                           |                                                    | N 100 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | NGHOUSE NUMBER (If applicable)   |
|                                                                                                                                                                                                           |                                                    | OTATE OLD IN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | NG 10002 Nomber (in application) |
| SEE INSTRUCTIONS ON REVERSE. TYPE OR PRINT CLEARLY. LEAD AGENCY                                                                                                                                           | LEAD AGENOV EMAIL                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DATE                             |
| Laguna County Sanitation District                                                                                                                                                                         | LEADAGENCY EMAIL<br>kethomp@countyofsb.org; Jleipn | er@countyofeh ora                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 01/15/2025                       |
|                                                                                                                                                                                                           | kethomp@countyolsb.org, olcipii                    | er@countyolob.org                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | DOCUMENT NUMBER                  |
| COUNTY/STATE AGENCY OF FILING Santa Barbara                                                                                                                                                               |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | DOCOMENT NOMBER                  |
| PROJECT TITLE                                                                                                                                                                                             |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
| Grazing Lease Agreement with K2 Cattle Comp                                                                                                                                                               | pany, LLC - Fourth a                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | pervisorial Districts            |
| Laguna County Sanitation District                                                                                                                                                                         | kethomp@countyofsb.org; amarred                    | ondo@countyofsb.org                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | (805) 803-8756                   |
| PROJECT APPLICANT ADDRESS                                                                                                                                                                                 | CITY                                               | STATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ZIP CODE                         |
| 620 West Foster Road                                                                                                                                                                                      | Santa Maria                                        | CA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 93455                            |
| PROJECT APPLICANT (Check appropriate box)                                                                                                                                                                 | - Carrier Francis                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
| ✓ Local Public Agency School District                                                                                                                                                                     | Other Special District                             | State A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | gency Private Entity             |
|                                                                                                                                                                                                           |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | -                                |
| CHECK APPLICABLE FEES:                                                                                                                                                                                    |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 0.00                             |
| ☐ Environmental Impact Report (EIR)                                                                                                                                                                       | \$                                                 | 1 10 20 20 20 20 20 20 20 20 20 20 20 20 20                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0.00                             |
| ☐ Mitigated/Negative Declaration (MND)(ND)                                                                                                                                                                | \$                                                 | 2,968.75 \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0.00                             |
| ☐ Certified Regulatory Program (CRP) document - payment due of                                                                                                                                            | directly to CDFW                                   | \$1,401.75 \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 0.00                             |
| <ul> <li>☑ Exempt from fee</li> <li>☑ Notice of Exemption (attach)</li> <li>☐ CDFW No Effect Determination (attach)</li> <li>☐ Fee previously paid (attach previously issued cash receipt copy</li> </ul> | <i>n</i>                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
| ☐ Water Right Application or Petition Fee (State Water Resources                                                                                                                                          | s Control Board only)                              | \$850.00 \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0.00                             |
| ✓ County documentary handling fee                                                                                                                                                                         | 3 Control Board Ciny)                              | \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 50.00                            |
| Other                                                                                                                                                                                                     |                                                    | \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                  |
| PAYMENT METHOD:                                                                                                                                                                                           |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
| ☐ Cash ☐ Credit ☐ Check ☑ Other                                                                                                                                                                           | TOTAL RI                                           | ECEIVED \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 50.00                            |
| SIGNATURE AGEN                                                                                                                                                                                            | ICY OF FILING PRINTED NA                           | ME AND TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                  |
| 144                                                                                                                                                                                                       | herine Douglas, Der                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                  |
| - william - cuerta                                                                                                                                                                                        |                                                    | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                  |