FORM AMJP-1A.6.6 AMJP RECIPIENT INTERIM FINANCIAL REPORT

PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2106-0048. Public reporting for this collection of information is estimated to be approximately 90 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing and reviewing the collection of information. All responses to this collection of information are required to obtain or retain a benefit (pursuant to the American Rescue Plan Act of 2021 (ARPA), Public Law (P.L.) 117-2, § 7201-7202). Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Department of Transportation, OST-S-83, 1200 New Jersey Avenue S.E., Washington, DC 20590.

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AMJP Recipient Business Name		
AMJP Agreement Number	6 9 A 3 4 5	A M J 0
Reporting Period		
Total Allowable Costs Incurred in Reporting Period	Begin date	End date
The reporting period should match the payro provided as attachments.	oll period associated w	ith any payroll reports
Attachments: Provide a list identifying all attachments. Attach payr reporting period, consistent with the current AMJP Roads AMJP-1A.6.5) and any notices of actions affecting the employee group. Do not include any personally ident as necessary.	ecipient Notification to US te Eligible Employee Grou	DOT of EEG Composition (Form p or replacements in the eligible
Certification: I certify that the allowable costs incurred in t with the terms of the agreement identified by Recipient remains in compliance with that agnotice provisions in sections 2.2, 2.3, 2.4, and	the AMJP Agreemengreement, including the	t Number above and that the e mandatory reporting and
I certify under penalty of perjury that the info I have authority to submit this information to		
I acknowledge that false, fictitious, or fraudu fact, may subject me to criminal penalties, ci 1001; 31 U.S.C. 3729; 31 U.S.C. 3802).		•
Signature	Date	
Name of Signing Official	Title of Signing Off	icial