

LEASE REPORT REQUEST

AGENCY NUMBER: (3 Numeric Characters)

AGENCY NAME: (Up to 21 Characters)

FISCAL YEAR: (Ending June 30th) OF REPORT REQUEST (YYYY):

0 6 - _ _ _ _

LEASE REPORTS FOR THE FOLLOWING LEASES ARE REQUESTED:

CHECK ONE:

LESSEE

LESSOR

LEASE # _ _ _ _

DIV. # _ _

LEASE # _ _ _ _

DIV. # _ _

LEASE # _ _ _ _

DIV. # _ _

LEASE # _ _ _ _

DIV. # _ _

LEASE # _ _ _ _

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LEASE # _ _ _ _

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LEASE # _ _ _ _

DIV. # _ _

LEASE # _ _ _ _

DIV. # _ _

OR:

ALL LEASES IN LAS WITH or W/O ALL LEASE SUMMARY DISCLOSURE

CHECK ONE:

INPUT DATA (To Verify Submission Received And Input Correct)

FULL DISCLOSURE (For Preparation of Year End Financial Statements)

Note: Input Data Reports for each lease will be sent to agencies as input forms are keyed into LAS. Prior to Fiscal Year End Close, Input Data Reports for ALL leases will be sent to agencies for verification and confirmation. After Final Close each year, both the Summary and the Full Disclosure Reports for ALL leases will be sent to agencies.

PREPARER'S NAME: _____

TITLE: _____

PREPARER'S PHONE NUMBER: _____

DATE APPROVED: _____

AUTHORIZED LAS SIGNATURE: _____

TITLE: _____