

Form: AV-109 PROPOSED DIRECTED FUNDING PROJECTS

FUNDED BY:

<input type="checkbox"/>	State Capital and Infrastructure Funds (SCIF)	<input type="checkbox"/>	NC Airport Improvement (NCAIP) Funds
<input type="checkbox"/>	General Aviation Legislative (GAL) Funds	<input type="checkbox"/>	Transportation Reserve Program (TRP) Funds

PLANNED PROJECTS: Please provide in the table below a complete list of all projects planned for your appropriation.

Airport Name:_____ WBS #:_____ Date:_____

1. Is project scope changing?
2. If “yes”, what change # is this?
3. Has this change been discussed with the legislator that supported funding?
4. Report for SFY Quarter Ending Date:

Project Title	Project Description	Estimated Cost of Directed Funds Proposed for this Project (\$00,000,000)	Other Project Funding Sources, if any (\$ Federal, State, Local or Other)	Estimated Start Date (MM/YYYY)	Estimated End Date (MM/YYYY)