

PRIVATE ACTIVITY BOND REPORT
CAPITAL FACILITIES FINANCED WITH STATE BOND PROCEEDS

This report must be submitted concurrently with the first Controlling board release request for each appropriation line item enacted in each capital act (or created via a transfer of appropriation authority).

1/

AGENCY OR INSTITUTION: Wright State University**PROJECT TITLE:** Envelope Repairs**APPROPRIATION ACT:** HB687**APPROPRIATION AMOUNT:** \$1,500,000.00**APPROPRIATION LINE ITEM:** C27570**TOTAL PROJECT AMOUNT:** \$211,130.00

2a/

Provide a brief general project description of the overall project/facility:

Renovate envelope repairs in various buildings across campus.

2b/

Identify the portion of the project or equipment for which the funds currently being released will be utilized:

Health Science Loading Dock roof contractor

3/

Based upon review of the guidelines for determining private business use and private payment of the project financed with State tax-exempt bond funds, there:

_____ WILL/MAY BE x WILL NOT BE Private Business Use

NOTE: If there will/may be any private business use in or of the project, you must complete page 2.

_____ WILL/MAY BE x WILL NOT BE Private Payment

NOTE: If there will/may be any private payment derived from the project, you must complete page 3.

4/

Complete this report by signing off on the following certifications:

The agency or institution i) owns and does not intend to sell or otherwise dispose of the financed project, facility or equipment, or ii) has an interest in the project/facility and has no intent to relinquish that interest.

None of the State appropriations for the project will be used to make principal or interest payments on, or refund, renew, roll over, retire or replace, any other obligations previously issued by the agency or institution.

Any expenditures by the agency or institution that are to be reimbursed from State capital appropriations were made in anticipation of the reimbursement from those appropriations and a declaration of such intent was documented and conveyed to the appropriate State bond-issuing authority.

To the best of my knowledge, information and belief, all statements and representations in this report are current facts or expectations. Those expectations are reasonable, and there are currently no other facts or circumstances that would or could materially change those statements and representations. The agency or institution recognizes that those statements and representations will be relied upon by the State for the purposes of its certifications relating to tax exemption of its Bonds as described in certain Treasury Regulations. ***The agency or institution acknowledges that any change in those facts or expectations may result in different requirements, and that the OBM and Regents should be promptly advised if such changes occur or are anticipated to occur.***

Confirmed By:



aat 1/22/23

(Signature: Agency Administrator or Institution VP)

Title:

Construction Administrator

Phone Number:

937-775-3103

Email Address:

Angie.tipton@Wright.edu

Date of Signing:

1-22-23

PRIVATE ACTIVITY BOND REPORT**PRIVATE BUSINESS USE****(Complete Only If Private Business Uses Are Involved)**

Indicate below the use of space in the facility if financed (in whole or in part) by State bond proceeds. Provide an estimate of the costs of the facility/project allocated to each private use identified as well as the total cost of the facility/project. In the case of facilities, include space that benefits from or is served by financed improvements to the overall facility such as roof repair, heating/cooling system, parking, etc. If any private payments are expected from the private user, page three of this report also must be completed.

Potential Private Business Uses (1)	Check if Private Uses Are Expected (2)	Cost of Project Allocated to Private Uses (3)	Total Cost of Project (4)	Nature of Use Arrangement (5)	Check if Private Payments Are Expected (6)
Ad Display Area					
Banking/ATM					
Bookstore					
Classrooms					
Concession/News Stand					
Copying/Printing					
Dormitory					
Food/Dining/Cafeteria					
Game Room					
Health/Exercise Club					
Hospital					
Hotel/Residences					
Job Training					
Laboratory					
Laundry/Dry-Cleaning					
Library					
Medical Clinic or Office					
Museum					
Office Space					
Post Office					
Product Development					
Research & Development					
Retail Stores/Shops					
Sports/Recreation/Gym					
Storage					
Student Center					
Telecommunications					
Theater					
Vending					
Other (List)					

(7) TOTAL PRIVATE USE COSTS: _____**(8) TOTAL COST OF PROJECT:** _____

PRIVATE ACTIVITY BOND REPORT

PRIVATE PAYMENT

(Complete Only If Private Payments Are Involved)

For each private business use identified on the previous page for which there is expected to be private payments as described in the Guidelines, provide the following information in regard to those expected private payments.

For each private payment situation, a copy of the agreement, arrangement, or contract must be attached to this Private Activity Bond Report.

PRIVATE PAYMENT				
Potential Private Business Use (1)	Type of Payment (Rent, user fees, revenues, share of receipts, etc) (2)	Amount of Payment (3)	Frequency of Payment (4)	Total Amount of Expected Payments (5)