

CERTIFICATION & ATTESTATION

PLEASE TYPE OR PRINT ALL INFORMATION IN BLUE OR BLACK INK

COMMONWEALTH OF PENNSYLVANIA

| 400 NORTH STREET HARRISBURG, PENNSYLVANIA 17120 | | |
|---|--|--|
| | DATE | |
| | | |
| I hereby certify that | (NAME) | |
| | | |
| Director, Bureau of Patrol, of the Pennsylvania State Polic | - | |
| zones for aerial surveillance and traffic speed enforcement | of the Pennsylvania Department of Transportation. | |
| | | |
| | | |
| IN TESTIMONY WHEREOF, I HAVE HEREUNTO SET M | Y HAND AND SEAL OF THIS DEPARTMENT ON THE | |
| ABOVE DATE IN ACCORDANCE WITH SECTION 6103 OF THE | E JUDICIAL CODE, TITLE 42, PA Consolidated Statutes. | |
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| | | |
| | - 0 | |
| | Reves Riland | |
| | | |
| | SECRETARY OF TRANSPORTATION | |
| | | |

I hereby attest that the document or documents listed below and attached hereto are full, true and correct photostatic and/or microfilm copies of documents of which I have legal custody, and that the copies conform to the requirements of Section 6109 of the Judicial Code.

IN TESTIMONY WHEREOF, I HAVE HEREUNTO SET MY HAND AND SEAL ON THE ABOVE DATE, IN ACCORDANCE WITH SECTION 6103 OF THE JUDICIAL CODE.

| | (SEAL) |
|--------------------------------|--------|
| DIRECTOR, BUREAU OF PATROL | |