DESIGNATION OF SPONSOR'S AUTHORIZED REPRESENTATIVE

I, Kent Cagle	, City Manager ,
(Name)	(Title)
with the <u>City of Killeen</u>	designates Mike Wilson, Executive Director of Aviation
(Sponsor Name)	(Name, Title)
	authorized representative for the Skylark AWOS Relocation project
(Sponsor Name)	
	make approvals and disapprovals as required on behalf of the
City of Killeen.	
(Sponsor Name)	
	<u>City of Killeen, Texas</u>
	(Sponsor)
	By: Kent Cagle
	(Signature) ~ 2
	mid of a r
	Title: City Manager
	D.
	Date:
DESIGNATED REPRESENT.	A 7PY \$7 7D
DESIGNATED REFRESENT	Alive
Mailing Address: Mike Wils	son
Killeen Regional Airport	SOII
8101 Clear Creek Rd., Box C, K	illeen TV 76540
BTOT CICAL CICCA Rd., BOX C, N	directi, 1X 70349
*Physical/Overnight Address: K	illeen Regional Airport
8101 Clear Creek Rd., 3 rd Floor	
of the clear creek Rd., 5 1 foor	, Kinech, Texas 70549
Telephone Number: 254-501-87	701
201-01-01-01-01-01-01-01-01-01-01-01-01-0	01
E-Mail Address: mwilson@kille	eentexas.gov