

EXHIBIT "L"
GREATER ORLANDO AVIATION AUTHORITY
DESTINATION MANAGEMENT COMPANY

MONTHLY PASSENGER COUNT REPORT		
REPORT FOR MONTH: _____ YEAR _____		
COMPANY NAME: _____		
ADDRESS: _____		
PHONE NUMBER _____		
Days of Month	Passenger Number	List permitted entities providing transportation
1		
2		
3		
4		
5		
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28		
29		
30		
31		
32. Total		
I do hereby certify that, as an authorized representative for the Operator identified above, the above monthly passenger count report is in accordance with the terms of the Ground Transportation Rules and Regulations, and is a true statement of the number of Operator's Passengers, and that the Permitted entities identified provided ground transportation services for this month.		
_____ Signature		_____ Printed Name
_____ Title		_____ Date