Consumer Confidence Report Certification Form

(to be submitted with a copy of the CCR)

(To certify electronic delivery of the CCR, use the certification form on the State Board's website at http://www.swrcb.ca.gov/drinking_water/certlic/drinkingwater/CCR.shtml)

| Water System Name: | | Los Osos Community Services District | | | |
|----------------------------|--|---|---|--|---|
| Water System Number: | | 4010016 | | | |
| May 20 and the system c | June 20, 2020 ertifies that th |) to custom e informati | eby certifies that its Consers (and appropriate notion contained in the report d to the State Water Res | ces of availability hat is correct and consist | we been given). Further stent with the compliance |
| Certified b | y: Name | | Ron Munds | | |
| | Signat | ure: | TRAN | | |
| | Title: | | General Manager | | |
| | Phone | Number: | (805) 528-9379 | Date: | 6/19/20 |
| \boxtimes CCR $_{0}$ | oply and fill-inwas distributed | where app I by mail to s were use | nd good-faith efforts take propriate: o all water billing custom d to reach non-bill payi | ers. | |
| This form is pr | Posting the CCR on the Internet at www.losososcsd.org Posted the CCR in public places (attach a list of locations) Delivery to community organizations (attach a list of organizations) rovided as a convenience for use to meet the certification requirement of the California Code of Regulations, section 64483(c). | | | | |