Haskins-Sells

Crocker Center
333 South Grand Avenue
Los Angeles, California 90071-3190
(213) 253-4600 Telex 674922

AUDITORS' REPORT

To the Board of Directors of Southern California Rapid Transit District:

We have examined the financial statements of Southern California Rapid Transit District (the "District") for the year ended June 27, 1987 and have issued our report thereon dated September 25, 1987 which was modified as to the consistent application of accounting principles as described therein. Our examination was made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In connection with our examination, we have also examined the reporting schedules for the year ended June 27, 1987, listed in the accompanying index. Our examination included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances to enable us to express an opinion on the conformance of the information presented by the District with the requirements of the Urban Mass Transportation Administration (UMTA) as set forth in its Uniform System of Accounts and Records and Reporting Systems.

The reporting forms were prepared in a format prescribed by UMTA and in our opinion, do not include all of the details and disclosures necessary for a fair presentation of financial position, results of operations, and changes in financial position of the District, principally because statements of changes in equity and of changes in financial position and customary note disclosures are not presented.

In our opinion, the reporting schedules listed in the accompanying index present fairly the information contained therein and conform in all material respects with the accounting requirements of UMTA set forth in its Uniform System of Accounts and Records and Reporting System.

This report is intended solely for filing with UMTA and should not be used for any other purpose.

Devitte Hedring + Telle

October 26, 1987

SOUTHERN CALIFORNIA RAPID TRANSIT DISTRICT YEAR ENDED JUNE 27, 1987

INDEX TO SECTION 15 REPORTING SCHEDULES

COVERED BY REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Description	Form No.
Balance Sheet Summary Schedule	101
Capital Subsidiary Schedule - Sources of Public Capital Assistance	103
Revenue Summary Schedule	201
Revenue Subsidiary Schedule - Sources of Public Assistance	203
Expenses Classified by Function	301.
Operators Wages Subsidiary Schedule	321
Fringe Benefits Subsidiary Schedule	331
Pension Plan Questionnaire	332

FORM 001 TRANSIT SYSTEM IDENTIFICATION SCHEDULE

Fiscal Year End Transit ID 9/0/2/1 1. Transit system name: SOUTHERN CALIFORNIA RAPID TRANSIT DISTRICT Transit system address: 2. Street address 425 South Main Street City Los Angeles Zip Code 90013 State <u>California</u> . Person to be contacted regarding this report: 3. Last Name First Name and Initial(s) Title __Controller-Treasurer 972-6581 Telephone number extension 4 Reporting Level: R - Required Level A - A Level (Voluntary) B - B Leve! (Voluntary) C - C Level (Voluntary) Type of organization: (Check one only) 5. A. Public agency or authority which directly operates all transit service (not a State DOT) Public agency or authority which contracts for some or all transit service (not a State DOT) C. State Department of Transportation D. Private carrier under contract to one or more public agencies

E. Private carrier not under contract to a public agency

F. Other (describe on Form 005)

FORM 002 Page 1 of 4

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

	Transit ID	9 0 2 1			Level	R
	Fiscal Year E	nd 0 6 2	7 8 7 Year	Mo	ode(s)	MB
1. 2.	Name of co Address – City – State –	Road	ty of Los Angeles, L Department P.C. Box Angeles — Zip Code — 9005	4089	onic Ass	sociation
3.	Name of co	ontact person: - Sur	Sam Ito pervising Civil Engi	neer II		 ,
	Telephone	. 218	226-8311			·
	, e.e.p., e.	area code	number	extension		:
4.	Agency in	Item 1 is:				•
	Υ A.	Public agency co	ontracting for transit	service		
	B.	Other public ag	ency providing transi	t service under contr	act	
	c.	Private carrier p	providing transit servi	ce under contract		
	D.	Private carrier c	ontracting for transit	service		
	E.	Other (describe	e on Form 005)			
5.	Nature of o	contractual rela	tionship (check all bo	xes that apply):		
	X A.	Cash reimburse	ment of some or all o	f contract carrier's op	erating	deficit
	<u>X</u> B.	Cash payment t	o contract carrier for	specific mass transpo	rtation	services
	C.	Cash reimburse	ment to contract carr	ier for reduced fare p	rogram	S
	D.	Vehicles are giv carrier	en, loaned, or leased	for below market va	lue to co	ontract
	E.		monetary considerati tract carrier on Form		gations	
6.	Number of	f vehicles in max	imum service used fo	r contracted service:	36-10	4 (Off-peak)
7.	Contract a	mount: \$ <u>347</u>	,000 (estimated)			
8.		evenues allowed	d: <u>x</u> yes <u>287,000</u>	no		•

^{*}This should be name of bubilic agency contracting for service if report is for contractor operating 50 or more vehicles.

FORM 002 Page 2 of 4

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

	Transit ID 9 0 2 1	Leve! R
	Fiscal Year End 0 6 2 7 8 7 Month Day Year	de(s) MB
1. 2.	Name of contractor* Omnitrans Address	
3.	Name of contact person: Name of contact person: Director of Accounting	
	Telephone 714 889-0811 extension	· ·
4.	Agency in Item 1 is:	
	 A. Public agency contracting for transit service B. Other public agency providing transit service under contra C. Private carrier providing transit service under contract 	ct
	D. Private carrier contracting for transit service E. Other (describe on Form 005)	
5.	Nature of contractual relationship (check all boxes that apply):	
	\overline{X} A. Cash reimbursement of some or all of contract carrier's ope	erating deficit
	B. Cash payment to contract carrier for specific mass transpor	tation services
	C. Cash reimbursement to contract carrier for reduced fare pr	rograms
	D. Vehicles are given, loaned, or leased for below market value carrier	ue to contract
	E. Other. Explain monetary consideration received and oblig incurred by contract carrier on Form 005.	ations
6.	Number of vehicles in maximum service used for contracted service:	35
7.	Contract amount: \$ 1,125,000	
8.	Retained revenues allowed: yes X no If yes, amount on annual basis: \$	

A.R. I.D. LIBRARY

^{*}This should be name of public agency contracting for service if report is for contractor operating 50 or more vehicles

FORM 002 Page 3 of 4

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

	Transit ID 9 0 2 1	Level	R
	Fiscal Year End 0 6 2 7 8 7 Month Day Year	de(s)	MB
1.	Name of contractor* Orange County Transit District		
2.	Address 11222 Acacia Parkway, P.O. Box 3005		
•	City Garden Grove		******
	State California Zip Code 92642		
3.	Name of contact person: Arthur Busse		
J.	Title Manager of Accounting and Budgeting		
٠	Tolophone 714 971-6353		
	Telephone 714 971-6353 area code number extension		 •
4.	Agency in Item 1 is:		
	X A. Public agency contracting for transit service		
	B. Other public agency providing transit service under contra	ct	
	C. Private carrier providing transit service under contract		
	D. Private carrier contracting for transit service		
	E. Other (describe on Form 005)		
5.	Nature of contractual relationship (check all boxes that apply):		
	\overline{X} A. Cash reimbursement of some or all of contract carrier's ope	erating	deficit
	B. Cash payment to contract carrier for specific mass transpor	tation :	services
	C. Cash reimbursement to contract carrier for reduced fare pr	ogram	S
	D. Vehicles are given, loaned, or leased for below market value carrier	ie to co	ontract
	E. Other. Explain monetary consideration received and oblig incurred by contract carrier on Form 005.	ations	
6.	Number of vehicles in maximum service used for contracted service:	81	
7.	Contract amount: \$ 2,600,000		
8.	Retained revenues allowed: yes X no If yes, amount on annual basis: \$		

^{*}This should be name of public agency contracting for service if report is for contractor operating 50 or more vehicles

FORM 002 Page 4 of 4

CONTRACTUAL RELATIONSHIP IDENTIFICATION SCHEDULE

(Use as many pages as necessary)

	Transit ID	9 0 2 1		Level	R
	Fiscal Year I	End 0 6 2 Oay	7 8 7 Year	Mode(s)	<u>MB</u>
1.	Name of o	ontractor*Ri	verside Transit Agenc	y *	
2.	Address		25 Third Street		
	City	Ri	verside		
	State	California	—— Zip Code ——92507		
3.	Name of o	contact person: -	Steve Oller		
J .	Title —	Manager of C	ontract Services		
	Telephon	714	684-0850		•
	rerephon	area code	number	extension	
4.	Agency ir	ı Item 1 is:			
	X A.	Public agency c	ontracting for transit se	ervice	
	B.	Other public ag	ency providing transit	service under contract	
	c.	Private carrier p	providing transit service	e under contract	
	D.	Private carrier c	ontracting for transits	ervice	
	E.	Other (describe	e on Form 005)		
					
5.	Nature of	contractual rela	tionship (check all boxe	es that apply):	
	X A.	Cash reimburse	ment of some or all of	contract carrier's operating	deficit
	<u></u> B.	Cash payment t	o contract carrier for sp	pecific mass transportation	services
	c.	Cash reimburse	ment to contract carrie	er for reduced fare program	S
	D.	Vehicles are giv carrier	en, loaned, or leased f	or below market value to co	ontract
	E.		monetary consideration tract carrier on Form 0	on received and obligations 05.	
6.	Number	of vehicles in max	timum service used for	contracted service: 13	
7.	Contract	amount: \$ <u>65</u> 7	,000		····
δ.	Retained revenues allowed: yes X no If yes, amount on annual basis: \$				

^{*}This should be name of public agency contracting for service if report is for contractor operating 50 or more vehicles.

FORM 003 Page 1 of 1

MAXIMUM SERVICE VEHICLES SUMMARY SCHEDULE -- DIRECTLY OPERATED SERVICE

(Use as many pages as necessary)

Level

R

	Month	Day	Year
Fisca! Year End	0 6	2 7	8 7
Tansitio	9 0	2 1	

3		1	HICLES OPER				EHICLES AV. R MAXIMUN	
Line No.	MODE	VEHICLE TYPE	NUMBER	OWNERSHIP CODE		VEHICLE TYPE	NUMBER	OWNERSHIP CODE
S.	MB	. A3	• 19	00 .] -	AB	40	00
92	MB	' EA	1995	00		ва	2539	00
03	MB	E3 !	47	00		вв	62	00
04	MB	פס	0	00		DD	20	00
05		, 1					·	
5	Total	i	2061			Total	2661	
67								
30								
0è								
1C								
11								
12								
13	-	:		•				
14	-							
15								
16		;	i i					
			Î					i
		:						
. è	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
20			:					•

SUPPLEMENTAL INFORMATION SCHEDULE

$\begin{array}{c c} \text{Iransit ID} & 9 & 0 & 2 & 1 \end{array}$	Level R
Fiscal Year End 0 6 2 7 8 7 Month Day Year	
Note: Use a separate page for each applical item per page. Use as many pages as necess	ole item below. Check and describe only one ary.
1. Major service start-up	8"Other" organization type (Form 001)
2. Major service discontinuance	9"Other" contractual relationship (Form 002)
3. Major new equipment or facilities	10. "Cther" mode(s) or vehicle type(s) (Forms 003/004)
4. Fare change	11. Other" reasons for days not operated (Forms 406/407)
5. Strike	12. Motorbus fixed guideway segments (Form 403)
6. Other major service interruption	13. Fare revenue retained by purchased service contractor (300 series forms)
7. Fleet total discrepancy (Form 408)	14. Fare revenue returned to reporter by purchased service contractor (300 series forms)
	15. Other
Description of above, plus any other r	elevant information.
Motorbus Fixed Guideway Segments:	
1. Controlled Access Right-of-way	Segments
·	on the El Monte Busway which is a
	for motorbuses and high occupancy
motor vehicles (3+ persons). 1	This east-west facility is in the
median of San Bernardino Freewa	
direction. The eastern end of	this facility is the intersection
of San Bernardinc Freeway and S	Santa Anita Avenue. The western end
of this facility is at Mission	Road and Eliott Street, where the
San Bernardino Freeway passes o	over Mission Road before crossing

Continued on next page.

SUPPLEMENTAL INFORMATION SCHEDULE

7 rsit ID 9 0 2 1		Level
iscal Year End 0 6 2 7 8 7 Month Day Year		
e: Use a separate page for each applicate a per page. Use as many pages as necess.		em below. Check and describe only one
Major service start-up	8.	"Other" organization type (Form 001)
Major service discontinuance	9.	"Other" contractual relationship (Form 002)
Major new equipment or facilities	10.	"Other" mode(s) or vehicle type(s) (Forms 003/004)
Fare change	11.	"Other" reasons for days not operated (Forms 406/407)
Strike	12.	× Motorbus fixed guideway segments (Form 403)
Other major service interruption	13.	Fare revenue retained by purchased service contractor (300 series forms)
Fleet total discrepancy (Form 408)	14.	Fare revenue returned to reporter by purchased service contractor (300 series forms)
	15.	Other
Description of above, plus any other r	releva	ant information.
the Los Angeles River. The leng	gth of	this segment, both directions, is
21.6 miles.		
		

SUPPLEMENTAL INFORMATION SCHEDULE

nsit ID 9 0 2 1	Level
Fiscal Year End 0 6 2 7 8 7 Month Day Year	
te: Use a separate page for each applica m per page. Use as many pages as necess	ble item below. Check and describe only one sary.
Major service start-up	8"Other" organization type (Form 001)
Major service discontinuance	9. Other" contractual relationship. (Form 002)
Major new equipment or facilities	10. "Other" mode(s) or vehicle type(s) (Forms 003/004)
Fare change	11. "Other" reasons for days not operated (Forms 406/407)
Strike	12. X Motorbus fixed guideway segments (Form 403)
Other major service interruption	Fart levenue rétained by purchased service contractor (300 series forms)
Fleet total discrepancy (Form 408)	14. Fare revenue returned to reporter by purchased service contractor (30) series forms)
	15. Other
Description of above, plus any other	
2. Exclusive Access Right-of-way S	begments
2.1 Spring Street Exclusive Bus La	nne
	es on a Spring Street contra-flow lane.
	The facility consists of one northbound
lane. The south end of this f	acility is the intersection of Spring
and 9th streets, while the nor	th end of this facility is at Spring
	The length of this facility is 1.5 miles.
	886, a segment of this facility (Spring
and 9th streets to Spring and	1st streets) was closed to traffic for
repair work for part of this f	iscal year of reporting (from June 29,

Continued on next page.

SUPPLEMENTAL INFORMATION SCHEDULE

9 0 2 1	Level
scal Year End 0 6 2 7 8 7 Month Day Year	
e: Use a separate page for each applical per page. Use as many pages as necess	ble item below. Check and describe only one ary.
Major service start-up	8. Other" organization type (Form 001)
Major service discontinuance	9. Other" contractual relationship (Form 002)
Major new equipment or facilities	10. Other" mode(s) or vehicle type(s) (Forits 003/004)
Fare change	11. Other" reasons for days not operated (Forms 406/407)
Strike	12. X Motorbus fixed guideway segments (Form 403)
Other major service interruption	13. Fare revenue retained by purchased service contractor (300 series forms)
Fleet total discrepancy (Form 408)	14. Fare revenue returned to reporter by purchased service contractor (300 series forms)
	15. Other
Description of above, plus any other	relevant information.
	However, 0.53 mile of this facility was ear. A weighted value of 0.77 mile has 06 and 403.
lanes to pickup and discharge t Hollywood Freeway are located a Western Avenue. The eastbound	s on many exclusive freeway turnout he passengers. The turnout lanes on t Alvarado Street, Vermont Avenue and lengths of these exclusive turnout lanes ., respectively. The westbound lengths
of these exclusive turnout lane	s are 585 ft., 615 ft. and 590 ft.,

Continued on next page.

SUPPLEMENTAL INFORMATION SCHEDULE

= nsit ID g 0 2 1	Level R
Fiscal Year End 0 6 2 7 8 7 Month Day Year	
te: Use a separate page for each applicat m per page. Use as many pages as necess	ole item below. Check and describe only one ary.
Major service start-up	8. Other" organization type (Form 001)
Major service discontinuance	9. Other" contractual relationship (Form 002)
Major new equipment or facilities	10. "Other" mode(s) or vehicle type(s) (Forms 003/004)
Fare change	11. Other" reasons for days not operated (Forms 406/407)
Strike	12. Motorbus fixed guideway segments (Form 403)
Other major service interruption	Fact revenue retained by purchased service contractor (300 series forms)
Fleet total discrepancy (Form 408)	14. Fare revenue returned to reporter by purchased service contractor (300 series forms)
	15. Other
Description of above, plus any other i	relevant information.
respectively. The turnout lane	s on the Harbor Freeway are located at
Slauson and at Manchester avenu	es. The southbound lengths of these
exclusive turnout lanes are 475	feet. The northbound lengths of these
exclusive turnout lanes are 475	feet. The turnout lanes on the San
Bernardino Freeway are located	at Puente and Azusa avenues. The east-
bound lengths of these exclusiv	e turnout lanes are 320 feet. The west-
bound lengths of these exclusiv	e turnout lanes are 320 feet.
· ·	

For... 005
Definition of Fixed Guideway Segments

				Number Hours Per Heek			
	•	Directional Mileage	Peak Period Level of Service	Single Occupant Autos Prohibited	Prohibition Enforced		
a.	Priority lane on multi-lane roadway.			•			
	- El Monte Busway	21.60	'E'	168	168		
b.	Exclusive lane parallel to a multi-lane roadway but separated from general traf-fic lane.		*				
	- Spring Street Bus Lane	0.77	'D'	168	168		
c,	Stand-alone road- way with no lane open to general traffic.						
	- Turnout lanes along Hollywood Freeway	0.67	'E'	168	168		
	- Turnout lanes along Harbor Freeway	0.36	'D'	168	168		
	- Turnout lanes along San Bernardino Free- way.	0.24	' C'	168	168		

Fiscal Year End 0 6 2 7 8 7

Level R

une To		ANNUAL TOTAL	NON-UZA	UZA	UZA	UZA
) [UZA Number]	002	071	039
)2	Mode Code MIB	2	J	1 002		1033
3	FG/NF• E G	¢				
)4	Type of Service. FGDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDDD	!				
5	Fixed Guideway Directional Route Miles	23.6		23.6	0	0
16	Actual Vehicle Revenue Miles	2,926,934		2,926,934	0	0
1	Passenger Miles	71,585,568		71,585,568	0	0
8	Operating Expense (Reporting Agency)	12,576,316		12.576.816		
)9	1 1 1 2 2 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2		V			
0	Retained Fare Revenue (Contract Service Provider(s))					
14 15	Operating Expense (Contract Service Provider(s))	89,735,065 1,659,651,872 462,961,868		89,371,547 1,654,309,345 461,643,430	86,253 732,363 381,336	277,265 4,610,164 937,102
1	Mode Code FG/NF•	; (,),				
?	Type of Service**	·				· · · · · · · · · · · · · · · · · · ·
	Fixed Guideway Directional Route Miles	1				
	Actual Vehicle Revenue Miles					
	Passenger Miles					
	Operating Expense (Reporting Agency)	1				
,			•			
7	Operating Expense (Contract Service Provider(s)) Retained Fare Revenue (Contract Service Provider(s))					

BALANCE SHEET SUMMARY SCHEDULE

Transit ID

9 0 2 1

Level

R

Fiscal Year End

0 6 2 7 8 7 Month Day Year

a	····		<u> </u>	<u> </u>
Line		ODICOT CLASS	DOLLAR	DOLLAR
No.		OBJECT CLASS	AMOUNT	AMOUNT
		ASSETS		
		Addeta		•
01	101.	Cash and Cash Items		108,247,963
02		Receivables	÷	91,648,190
03		Materials and Supplies Inventory		281,819
04		Other Current Assets		
05		Work in Progress		317,341,140
06		Tangiple Transit Operating Property	668,835,661	
07		Less Accumulated Depreciation	(288,082,834)	380,752,827
		•		
08	112.	Tanguale Property Other Than for Transit Operations	-	İ
09		Less Accumulated Depreciation	_	-
10	121.	intangible Assets	-	
11		Less Accumulated Amortization		
12	131.			789,145
1 13		Special Funds		204,045,174
14	151.	Other Assets		10,101,451
				1,113,207,709
15		TOTAL ASSETS		2722072077705
		LIABILITIES AND CAPITAL		
ا ء د	201	Teams Onyahlar		15 155 000
16 17		Trace Payables Accrued Payroll Liabilities		15,155,292
18		Accrued Tax Liabilities		33,833,568
19		Short-Term Debt		145 401 272
20		Other Current Liabilities		145,491,273 2,138,994
21		Advances Payable		
22	221.	•		13,403,454 95,939,969
23	231.			131,324,533
24		Deferred Credits	•	5,459,981
	- - - · · ·		•	J,4JJ,701
25		TOTAL LIABILITIES		442,747,064
26	3011	Public (Governmental) Entity Ownership		12 =20 004
27		Private Corporation Ownership		13,520,064
28		Private Noncorporate Ownership	,	
29		Grants, Donations, and Other Paid-in Capital		650 256 552
30		Accumulated Earnings (Losses)		(2 415 972)
50	J G J .			(2,415,972) 670,460,645
3.		TOTAL CAPITAL		070,400,645
! 32		TOTAL LIABILITIES AND CAPITAL		1,113,207,709
]2		TO THE BIT IS THE WIND WITHOUT		1113,20/,109
				i

CAPITAL SUBSIDIARY SCHEDULE - SOURCES OF PUBLIC CAPITAL ASSISTANCE

•	Fransit!D $9 0 2 1$		Level R
Fi	scal Year End 0 6 2 7 8 7	.h	
Line Vo	GOVERNMENT FUNDS APPLIED TO TRAN	VSIT SYSTEM	
01 02 03 04	PART A. FEDERAL GOVERNMENT I. Funds received from UMTA Act of 1964, as amended Section 3 Funds Section 5, 9a, and/or 9 Funds Other UMTA Funds Total UMTA Funds		28,454,124 4,394,866 23,485,533
05	II. Funds received from other Department of Transportation Grant Sec. 23 Total Other DOT Funds III. Other Federal Funding (Identify)	. Programs (Identity)	321
06 07	Total Other Federal Funding TOTAL FEDERAL ASSISTANCE		56,334,844
08	PART B. STATE/LOCAL GOVERNMENT I. Funds allocated to transit out of the general revenues of the government entity	STATE GOVERNMENT	LOCAL GOVERNMENT
09 10 11 12 13 14	II. Funds dedicated to transit at their source (Non-General Fund): Dedicated Taxes 1. Income Taxes 2. Sales Taxes SB 325 3. Property Taxes 4. Payroll Taxes 5. Utility Taxes 6. Commuter Taxes 7. Gasoline Taxes Prop 5 8. Other Taxes (Identify) SE 620/Anticle XIX/Others 32,678,361	1,628,728	18.760.214
16 17	Benefits Assessments 6,626,548 Total Other Taxes Bridge, Tunnel, and Highway Tolls III. Other Public Sources (<i>ldentify</i>) SB 90 37,681 City of T.A. 3,163,597 Prop A Todal Return 293,709	32,678,361	6,626,548
3:	Total Other Public Sources TOTAL STATE/LOCAL ASSISTANCE	34,307,089	3,494,987 28,881,749
: 20	PARTIC MISCELLANEOUS SOURCES Miscellaneous Sources of Funding (identify) Eme Savings Bank 961,781 Tota Miscellaneous Sources of Funding		961,781

Form 201 REVENUE SUMMARY SCHEDULE

Transit ID

Fiscal Year End O 6 2 7 8 7 Month Day Year	rel R
	
z c C C C C C C C C C C C C C C C C C C	15 KULE
No. REVENUE OBJECT CLASSES FOR PE	
01 401. Passenger Fares for Transit Service 189,334,	912
02 402. Special Transit Fares –	
03 403. School Bus Service Revenues – 04 404. Freight Tariffs –	
05 405. Charter Service Revenues	
06 406. Auxiliary Transportation Revenues 3,396,	153
07 407. Nontransportation Revenues 8,147,	728
08 408. Taxes Levied Directly by Transit System	
03 409. Local Cash Grants and Reimbursements 232,820,	948
10 410. Local Special Fare Assistance — — — — — — — — — — — — — — — — — — —	770
12 412. State Special Fare Assistance	775
13 413. Federal Cash Grants and Reimbursements 54,516,	282
14 430. Contributed Services – 15 Less Contra Account for Expenses (–) -0-	
Less Contile Account for Expenses	
16 440. Subsidy from Other Sectors of Operations	
17 TOTAL REVENUE 490,075,	802
-	
OPTIONAL INFORMATION:	
Passenger Fares for Transit Service by Mode	
18 Mode Code: MIB 189,334,	912
19	
20	
21	
22 23	
22	
25	

REVENUE SUBSIDIARY SCHEDULE - SOURCES OF PUBLIC ASSISTANCE

	Transit ID 9 0 2 1 Fiscal Year End 0 6 2 7 8 7 Month Day Year	•	Level R
Line No.	GOVERNMENT FUNDS APPLIED TO TRAK	VSIT SYSTEM	
	PART A. FEDERAL GOVERNMENT		
01	 Funds received from UMTA Act of 1964, as amended Section 5 and/or Section 9 Funds 	.*	53,603,785
	II. Funds received from other Federal Programs (Identify) Section 6 \$ 1,742		
	Section 8 879,348		
	Section 10 31,407		•
		· <u>·</u>	•
02	Total Other Federal Funds		912,497
03	TOTAL FEDERAL ASSISTANCE		54,516,282
	PART B. STATE/LOCAL GOVERNMENT	STATE GOVERNMENT	LOCAL GOVERNMENT
1	I. Funds allocated to transit out of the general		
04	revenues of the government entity		
	II. Funds dedicated to transit at their source (Non-General Fund):		1
	Dedicated Taxes		
05 06	 Income Taxes Sales Taxes SB 325 		115,299,638
00	3. Property Taxes		12372337030
08	4. Payroll Taxes		
09	5. Utility Taxes		
10	6. Commuter Taxes		
11	7. Gasoline Taxes		
	8. Other Taxes (Identify) Prop A 115,137.000		
	Prop A 115,137,000 SE 629 635,169		
12	Total Other Taxes	£35 1 £0	775,737,000
	· · ·		
13	Bridge, Tunnel, and Hignway Tolls	_	
•	III. Otner Public Sources (Identify)	•	
	Hollywood Bowl Prog. & Others 2,384,300		
	Wincop & Other State Prog. 1,224,516		
14	Total Other Public Sources	1,224,610	2,384,309
15	TOTAL STATE/LOCAL ASSISTANCE	1,859,779	232,820,947
	PARTIC. MISCELLANEOUS SOURCES		
	Miscellaneous Sources of Funding (Identify)		
· · 16	Total Miscellaneous Sources of Funding		

EXPENSES CLASSIFIED BY FUNCTION

Transit ID	9 0 2 1	Level R
Fiscal Year End	$ \begin{array}{c c} 0 & 6 & 2 & 7 & 8 & 7 \\ \hline Month & Day & Year \end{array} $	Mode

Line No.	Expense Object Class	Vehicle Operations 010	Vehicle Maintenance 041	Non-Vehicle Maintenance 042	General Administration 160	Total Expense for Period
	501 LABOR				1	
01	01 Operators' Salaries & Wages	133,008,528				133,008,528
02	02 Other Salaries & Wages	18,714,616	58,294,439	7,946,844	33,218,507	118,174,406
03	502. FRINGE BENEFITS	77,726,940	29,864,192	4,071,454	17,018,009	128,680,595
04	503. SERVICES	1,380,431	1,042,718	54,880	14,796,025	17,274,054
	504. MATERIALS & SUPPLIES	[1/300/431]	1,042,/10	34,000	11//30/023	1772717031
05	01 Fuel & Lubricants .	15,617,671	572,518			16,190,189
06*	02 Tires & Tubes	4,859,214	29,437			4,888,651
07	99 Other Materials & Supplies	930,124	22,807,853	4,064,844	2,394,803	30,197,624
08	505. UTILITIES		22,007,033	1/001/011	5,169,799	5,169,799
09	506. CASUALTY & LIABILITY COSTS			1,296,202	33,621,671	34,917,873
10	507 TAXES	1,289,869	57,471	172307202	25,179	1,372,519
	508. PURCHASED TRANSPORTATION	1/205/005	\	l		
11	01 Less than 50 Vehicles	_		-	lr =	
12	02 50 or More Vehicles					_
13	509. MISCELLANEOUS EXPENSE	_	_	_	2,814,334	2,814,334
14	510. EXPENSE TRANSFERS	(31,327)	(1,616,749)			(17,149,888)
15	TOTAL SYSTEM EXPENSES	253,496,066	111,051,879	17,434,224		475,538,684
	RECONCILING ITEMS:					
16	511. INTEREST EXPENSES	************				10,283,387
17	512. LEASES & RENTALS				i.	4,253,734
18						42,312,809
19	513.13 Amortization of Intangibles					_
20	514. PURCHASE LEASE PAYMENTS					
21	515. RELATED PARTIES LEASE AGREEMENT					-
22	516. OTHER RECONCILING ITEMS					
23	TOTAL RECONCILING ITEMS					56,849,931
24	TOTAL EVDENCES EDOM DUDI ISHED DEPONTS			•		
25	TOTAL EXPENSES FROM PUBLISHED REPORTS MFMO ITEM: Expenses not allowable for Feder	• • • • • • • • • • • • • • • • • • • •				532,388,615

^{*}Not applicable to rail modes

NOT REQUIRED FOR MODES WHICH

OPERATE 25 OR FEWER REVENUE

VEHICLES IN ANNUAL MAXIMUM SERVICE

FORM 321

OPERATORS WAGES SUBSIDIARY SCHEDULE

Transit ID	9 0 2 1	Level R
Fiscal Year End	0 6 2 7 8 7 Month Day Year	Mode 01

				
Line No.		TIME CLASSIFICATION	DOLLARS	HOURS
	1.	OPERATING TIME		
01	1.01	Report time (Pull out)	2,061,632	152,713
02	1.02	Turn-in time (Pull in)	1,077,369	79,805
93	1.03	Travel time	2,939,488	217,740
04	1.04	Platform time-line service	106,300,610	7,874,119
05	1.05	Platform time—charter & special service	345,822	25,616
06	1.06	Intervening time	39,903	2,956
07	1.07	Paid breaks & meal allowance	_	_
80	1.08	Minimum guarantee for call out	_	-
09	1.09	Minimum guarantee-daily	3,710,938	274,884
10	1	Minimum guarantee-weekly	_	-
11	1.11	Overtime premiumscheduled	5,001,121	769,403
2	1.12	Overtime premium—unscheduled	3,817,345	587,284
13	1.13	Spread time premium	-	_
14		Shift premium	_	_
15	1.15	Other operating premium	26,407	1,956
16		TOTAL OPERATING TIME	125,320,635	
	2.	NONOPERATING PAID WORK TIME		,
17	2.01	Instructor premium for operator training	122.654	98,123
18	2.02	Student training time	1,236,979	123,698
19	2.03	Accident reporting time	55.749	4,129
20	2.04	Witness time	47,577	3,524
21	2.05	Stand-by time	3,840,419	284,475
22		Time spent on union functions	_	_
23	1	Run sejection time	13,673	1,013
24	2.08	Other time spent in transportation administration	957,661	70,938
		Time spent in revenue vehicle movement control	149,600	11,081
		Time spent in ticketing and fare collection	_	-
	1	Time spent in customer service	-	_
	1	Time spent in other nonoperating functions	1,263,581	93,598
و`		TOTAL NONOPERATING PAID WORK TIME	7,687,893	
30	TOTA	LOPERATING AND NONOPERATING TIME	133,008,528	

ALL OPERATE 25 OR FEWER REVENUE VITALES IN ANNUAL MAXIMUM SERVICE

FORM 331 FRINGE BENEFITS SUBSIDIARY SCHEDULE

Transit ID

Fiscal Year End

6 2 7

8 7

Level

el R

 1 1			b	(
Luie Do		FRINGE BENEFIT OBJECT CLASSES	EMPLOYER TOTAL	EMPLOYEE TOTAL FY 87
01	502.01	FICA or Railroad Retirement	20,052,558	20,052,558
02	502 02	Pension Plans (including long-term disability insurance)	17,578,430	3,815,961
03	502 03	Hospital, Medical, and Surgical Plans	30,309,992	702,800
04	502 04	Dental Plans	343,728	_
05	502 05	Life Insurance Plans	478,358	509,639
06	502 06	Short-Term Disability Insurance /Long	495,074	
07	502 07	Unemployment Insurance	378,868	
08	502 08	Workmen's Compensation Insurance or Fed. Empl. Liab. Act Contribution	19,360,553	
09	502 09	Sick Leave	8,153,869	
10	502 09		7,084,703	
		Holiday (including all premiums paid for work on holidays)	19,647,633	
11	502 11	Vacation	2,438,000	
12	502.1 2	Other Paid Absence (bereavement pay, military pay, jury duty pay, etc.)		
13	502 13	Uniform and Work Clothing Allowances	1,479,330	
14	502.14	Other Fringe Benefits	. 885,504	
15		TOTAL	128,680,595	25,080,958

NOT REQUIRED FROM TRANSIT SYSTEMS
WHICH OPERATE 25 OR FEWER REVENUE
VEHICLES IN ANNUAL MAXIMUM SERVICE

FORM 332

PENSION PLAN QUESTIONNAIRE

	Mon	ith	Day	/	Ye	ar
iscal Year End	0	6	2	7	8	7
Transit ID	9	0	2 1]		

Level R

Line No.	ITEM	DOLLAR AMOUNT
01 02 03 04	 Fully Funded Plan Current service cost Prior service cost Interest on prior service cost Fully Funded Plan Total Cost 	14,858,618 2,719,812 N/A 17;578,430
0-5	2. Pay-As-You-Go PlanTotal Cost	
06	TOTAL PENSION PLAN COST (Line 04 plus Line 05)	17,578,430
07 8	3. Pension Liability a. Plan assets b. Less vested benefits Unfunded Liability	318,041,000 264,283,000 N/A
	4. If you committed to a fully funded plan, please indicate the following:	N/A
10	a. Unfunded prior service costb. Years required to fully fund this cost	
	5. If you have a pay-as-you-go-plan, please indicate the following:	N/A
12	a Unfunded prior service cost b. Years required to fully fund this cost .	
	6. If you now have a pay-as-you-go plan and you have had a recent actuarial study or other similar estimate made to determine your cost under a fully funded pension plan, please indicate what your pension plan expense would have been during the period under the fully funded plan:	N/A
16	a. Current Service Cost b. Prior Service Cost c. Interest on prior Service Cost	N/A N/A
17	ESTIMATED TOTAL COST	N/A

Form 401 TRANSIT SYSTEM SERVICE PERIOD SCHEDULE

Transit ID 9 0 2 1

Fiscal Year End 0 6 2 7 8

Level R
Mode 01

	, <u></u>	, C		A
Line No.	ITEM	WEEKDAY	SATURDAY	SUNDAY
	LIMITS OF SERVICE PERIOD:			
01	Time Morning service begins	0000	0000	0000
02	Time AM PEAK service begins	0600		
03	Time Midday service begins	0930		
04	Time PM PEAK service begins	1400		
05	Time Night service begins	1830		
06	Time Night service ends	2400	2400	2400
			·	
	TOTAL HOURS			
07	Morning period	6.0		
08	AM Peak period	3.5		
09	Midday period	4.5		
10	PM Peak period	4.5		
11	Night period	5.5		
12	ENTIRE DAY - TOTAL HOURS	24.0	24.0	24.0

101111402

REVENUE VEHICLE MAINTENANCE PERFORMANCE AND ENERGY CONSUMPTION SCHEDULE

•	ransit ID 9 0 2 1	Level R
	Fiscal Year End 0 6 2 7 8 7	Mode MB
	Month Day Year	
		<u>.</u>
	ITEM	AMOUNTS
	NUMBER OF ROADCALLS	
	For mechanical failure For other reasons	24,868 65,861
τ .	TOTAL ROADCALLS	90.729
	TOTAL LABOR HOURS FOR INSPECTION & MAINTENANCE	2,233,920
	NUMBER OF LIGHT MAINTENANCE FACILITIES	
	Serving under 200 vehicles Serving 200-300 vehicles Serving more than 300 vehicles	5 0
	TOTAL LIGHT MAINTENANCE FACILITIES	13
1	ENERGY CONSUMPTION	
	Kilowatt hours of propulsion power Gallons of diesel fuel Gallons of gasoline Gallons of LPG or LNG Gallons of bunker fuel	N/A 33,786,000 832,646 0

t applicable to rail modes

Form 403 Page 1 of 1 TRANSIT WAY MILEAGE SCHEDULE

	Fiscal Year End 0 6 2 7				Type of Serv	ice * DO
	Month Day	Year	đ	•	,	
 -ine 	GUIDEWAY CLASSIFICATIONS RAIL MODES	DIRECTIONAL ROUTE MILES	MILES OF TRACK	NUMBER OF CROSSINGS	NUMBER OF STATIONS	AVERAGE MONTHLY DIRECTIONAL ROUTE MILES**
123456789012	MODE CODE: RR At grade, exclusive row At grade, with cross traffic At grade, mixed & cross traffic Elevated on structure Elevated on fill Open cut Subway TOTAL MODE CODE: SC At grade, exclusive row At grade, with cross traffic					·
345678911	At grade, mixed & cross traffic Elevated on structure Elevated on fill Open cut Subway TOTAL MODE CODE: CR At grade, exclusive row At grade, with cross traffic					
234557890+	At grade, mixed & cross traffic Elevated on structure Elevated on fill Open cut Subway TOTAL MODE CODE: IP Exclusive ROW MODE CODE: CC Exclusive ROW					
2	MODE CODE: AG					
3	Exclusive ROW					
	NON-RAIL MODES	DIRECTIONAL ROUTE MILES ON EXCLUSIVE ROW	DIRECTIONAL ROUTE MILES ON CONTROLLED ACCESS ROW	DIRECTIONAL ROUTE MILES ON MIXED TRAFFIC ROW		
;	MODE CODE: MB TB FB TR OR	2.0	21.6	4915.8		23.6

emplete column glonly if there was a change (increase/decrease) in service during reporting period that affected number of itional route miles

restly Operated Service PT = Purchased Transportation Service

Form 404 TRANSIT SYSTEM EMPLOYEE EQUIVALENT SCHEDULE

Level

Mode

MB

Transit ID	9 0 2 1	
Fiscal Year End	0 6 2 7 8 7 Month Pay Year	

ine	LADOR CLASSISICATION	EMPLOYEE EQ	UIVALENTS
¥0	LABOR CLASSIFICATION	OPERATING LABOR	CAPITAL LABOR
			•
01	Transportation Administration	454	
02	Revenue Vehicle Operation	5133	
03	Transportation Support	120	
	•		
04	Vehicle Maintenance Administration	216	
35	Revenue Vehicle Inspection & Maintenance	1541	
- 1	Vehicle Maintenance Support	790	
			¥1.
J7	Non-Vehicle Maintenance Administration	23	
78	Non-Venicle Maintenance Support	316	
	Non Venicle Mannet Bridge Sepper	310	
)9	Marketing and Planning	264	
10	General Administration Support	1142	
		•	
1	TOTAL TRANSIT SYSTEM EMPLOYEE EQUIVALENTS	10004	133

TRANSIT SYSTEM ACCIDENTS SCHEDULE

it ID 9 0 2 1		Level	R
Year End 0 6 2 7 8 7	,	Mode	MB .
ITEM	COLLISION	NON-COLLISION	STATION
NUMBER OF ACCIDENTS CLASSIFIED AS:		ž	
Fatality, Personal Injury & Property Damage	2	0 [0
Fatality & Personal Injury .	0	0	0
Fatality & Property Damage	1	0	0
Fatality Only	10	0	0
Personal Injury & Property Damage	1086	8	Ç
Personal injury Only	N/A	673	U
Property Damage Only	.3709	54	0
TOTALACCIDENTS	4808	735	0
Revenue Vehicie Occupants On-Duty Employees Others	0 1	0	N/A N/A
Other Vehicle Occupants		—	
On-Duty Employees	<u> </u>	N/F	N/A
Others	2	N/A	N/A
Pedestrians			
On-Duty Employees	0	0	0
Others	10	0 1	О
NUMBER OF PERSONS INJURED CLASSIFED AS:		•	
Revenue Vehicie Occupants	•	•	
Revenue Vehicie Occupants On-Duty Employees	195	699	N/L
Revenue Vehicie Occupants	195 1121	699 587	N/£ N/£
Revenue Vehicie Occupants On-Duty Employees			N/A
Revenue Vehicle Occupants On-Duty Employees Others	1121	587 N/A	N/A N/A
Revenue Vehicie Occupants On-Duty Employees Others Other Vehicle Occupants	1121	587	N/A
Revenue Vehicie Occupants On-Duty Employees Others Other Vehicle Occupants On-Duty Employees Others	1121	587 N/A	N/A N/A
Revenue Vehicie Occupants On-Duty Employees Others Other Vehicle Occupants On-Duty Employees	1121	587 N/A	N/A N/A

TRANSIT SYSTEM SERVICE SUPPLIED, SERVICE CONS IED, SERVICE PERSONNEL, & SERVICE OPERATED SCH ULE

..ansit ID Fiscal Year End

NON-RAIL MODES

Level

Mode

Type of Service* [10]

	Month Day	Year					í	ype of Servi	ce* DO
Line		<u> </u>	CAVERAGI	d E WEEKDAY	£	AVERAGE	AVERAGE	AVERAGE	
Na.	ITEM	AM PEAK	MIDDAY	PM PEAK	OTHER	WEEKDAY TOTAL	SATURDAY TOTAL	SUNDAY TOTAL	ANNUAL TOTAL
	SERVICE SUPPLIED				<u> </u>	<u> </u>	<u> </u>		·
01	Number of vehicles in operation	1,935	1,345	1,965	1,373	1,965	1,097	893	N/A
02	Total actual vehicle miles	88,454	69,296	104,541	79,072	341,363			107,780,000
03	Total actual vehicle hours	6,098	5,693	8,068	4,900	24,759	212 341 16 087	172,935	7,876,004
04	Total actual vehicle revenue miles	74,280	65,961	91,277	57,891	289,409	192,454	157,665	92,662,000
05	Total scheduled vehicle revenue miles	74,875	66,411	92,316	58,393	291,995	193,860	158,885	93,462,780
06	Total actual vehicle revenue hours	5.532	5,562	7.520	4,031	22,644	15,244	12,287	7,256,910
07	Actual revenue capacity miles	4,902,480		6,024,282	3,820,806	19,100,994	12,701,964	10,405,890	6, 115, 692,000
08	Charter service hours						I. 		
09	Charter service miles				3				
10	School bus hours			<u> </u>				į	
11	School bus miles			111				{	
	· · · · · · · · · · · · · · · · · · ·							[
1	SERVICE CONSUMED			1					i
12	Unlinked passenger trips	388.427	327,911	526.347	151,993	1,394,679	887, 339	622,699	136,506,846
13	Passenger miles •			1,096,504	626.852	5,522,929	3,456,185	2,563,652	1.731.237.440
	•								
,	SERVICE PERSONNEL			0.5					
14	Scheduled full-time vehicle operators,	1,936	1,425	1,975	1,455				i i
15	Scheduled part-time vehicle operators	230	-0-	215	-0-	445	299		
16	Revenue vehicle movement control personne	43	59	65	.72	103	81	78	
17	Ticket/token sales agents, lare collectors,	0.4	27	37	4	37	7	2	· .
	gate keepers	24	37		4				
18	Route/schedule information operators	36	48	40	20	67	46		
19	Security agents	32	32	34	· 16	72	48	52	
20	Total service personnel	2,301	1,601	2,366	1,567	3,707	2,480	1,998	
	SERVICE OPERATED (Days)			ķ			,		
21	Days schedules operated					254	52	58	364
22	Days not operated due to no scheduled service	es							
23	Days not operated due to start-ups and/or terr	minations							
24	Days not operated due to strikes				_				
25	Days not operated due to officially declared e	mergencies							
26	Days not operated due to other reasons (descr	ribe on Form 005) .							
27	Total days					254	52	58	365/366

REVENUE VEHI E INVENTORY SCHEDULE

Type of Servi

Level

Fiscal	Year	End	06	2 7	8 7
			Month	Day	Year

NUMBER R OF LES IN FLEET LE TYPE CODE SHIP CODE ACTURE	MODEL NUMBER 되	NUMBER OF ACTIVE VEHICLES IN FLEET	emergency contingency vehicles	TYPE CODE	CAPACITY	CAPACITY	TOTAL MILES	AVERAGE LIFETIME
	ŭ	NG	EMERC CONTJ VEHIC	FULL TY	SEATING	STANDING	VEHICLES DURING THE PERIOD (000)	MILEAGE PER ACTIVE VEHICLE (000)
01 30 BA 00 1987 N	EO AN440	30	0	DF	47	23	103	3
	ZZZ* CBW300	30	0	DF	27	13	1188	100
	ZZZ* CBW300	31	1	DF	27	13	1364	100
	EO AN440A	405	10*	DF	43	21	22303	169
	MC T70604	35	0	DF	36	.18	1551	212
	EO N1223	0	20	DF	82	41	0	0
	MC T80204	931	8	DE	43	21	42:183	313
	AL 531028V1	220	6*	DF	46	23	11021	274
	AN SG220183A	10	0	DF	67	33	220	208
	AN SG220182A	29	<u> </u>	DF	67	33	7.24	208
	MG 10240B	192	4*	DF	47	23	4924	354
	LX 5310281	91	2*	DF	51	25	2583	546
	LX 5310281 ;	96	0*	DF	47	23	3391	659
	MC T8H5307A	175	14	DF	51	25	2659	248
	LX 111DDD061	41	0	DF	45	22	1496	641
1 · · · · I · · · · · · · · · · ·	MC T8H5307A	87	8	DF	47	23	3031	579
	LX 111CCDo61	42	2*	DF	51	25	1124	722
	LX	0	32*	DF	51	25	759	736
	MC 58M5303A	14	1	DF	49	24	710	1193
	LX 11100D51	0	9* .	DF	45	22	69	690
	LX IIICCD51	0	53*	DF	51	25	846	885
22						ļ <u>.</u>		
23	* Some contingency flee	t buses	peyond e	cono	nic re	pair.		
24	** Carpenter buses				·			L
25 2,630		2,459	171					<u></u>

al Year End Day Month Year

1111

Level

b	(2	d	е	f	g	h	i	j	k	1	m	n
NUMBER OF VEHICLES IN	TOTAL FLEET	VEHICLE TYPE CODE	OWNERSHIP CODE	YEAR OF MANUFACTURE	MANUFACTURER CODE	MODEL NUMBER	NUMBER OF ACTIVE VEHICLES IN FLEET	EMERGENCY CONTINGENCY VEHICLES	FULL TYPE CODE	SEATING CAPACITY	STANDING CAPACITY	TOTAL MILES ON ACTIVE VEHICLES DURING THE PERIOD (000)	AVERAGE LIFETIME MILEAGE PER ACTIVE VEHICLE (000)
30		BΛ	00	1987	NEO	AN440	30	0	DF	47	23	103	3
30		BB	00	1984	ZZZ*	CBW300	30	0	DF	27	13	1188	100
32		BB	00	198374	ZZZ*	* CBW300	31	1	DF	27	13	1364	100
415		BĀ	00	1983/4	NEO	ΔΝ440Δ	405	10 ^x	DF	43	21	22303	169
35		BA	00	1982	<u>CMC</u>	T70604	35	0	DE	36_	.18	1551	212
20		DD	00	1981	NEO	N1223	Q	20	DE	82	41	0	<u> </u>
939		BA	00	1980/1	GMC	T80204	931	88	DF	43	21	42483	313
226		BA	00	1980	GAI	S31028V1	220	6*	DF	46	23	_11021	274
10		ΛB	00	1978	MAN ·	SG220183A	10	0	DF	67	33	220	208
30		AB	00	1978	MAN	SG220182A	29	1_1	DE	67_	33	724	208
196		BA	00	1977	AMG ·	10240B	192	4*	DF	47	23	4924	354
93	I	BA	00	1975	FLX	5310281	91	2*	DF	51	25	2583	546
96		BA	00	1975	FLX	5310281 ;	96	0*	DF	47	23	3391	659
189		BA	00	1974	GMC	T8H5307A	175	14	DF	51	25	2659	248.
41		BA	00	1973	FLX	111000061	41	0	DF	45	22	1496	641
95	1	BA	00	1973	GMC	T8115307A	87	8	DF	47	23	3031	579
44		BA	00	1973	FLX	111CCDo61	4.2	2*	DF	51	25	1124	722
32		BA	00	1970/1	FLX	IIICCD61 i.	0	32*	DF	51	25	759	736
15		BA	00	1968	GMC	58M5303A	14	1	DF	49	24	710	1193
9	1	BA	00	1968	FLX	11100051	0	9*	DF	45	22	69	690
53		BA	00	1968	FLX	HICCD51	0	53*	DF	51	25	846	885
1 77						* Some contingency flee		peyond e	cono	nic re	pair.		
2,63	<u></u>	1		Ll			2,459	171	<u></u>			i	

*DO = Directly Operated Service PT = Purchased Transportation Service

U.S. GOVERNMENT PRINTING OFFICE: 1987-720-392/60114