## **Paper Work Reduction Act**

Submission of this form is voluntary. The purpose of this collection is to capture passenger enplanement data to be used to allocate Federal funds to eligible airports. The public reporting burden for this collection of information is estimated to average 1 hour and 30 minutes per response. Note: An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Ave SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20.

DEPARTMENT OF TRANSPORTATION - FEDERAL AVIATION ADMINISTRATION				FORM APPROVED		
AIRPORT ACTIVITY SURVEY (By Selected Air Carriers)				OMB NO. 2120-0067 07/31/2007		
TWELVE-MONTH PERIOD COVERED				FOR FAA USE ONLY		
DO NOT REPORT ACTIVITY PREVIOUSLY SUBMITTED ON BTS FORM 298C, SCHEDULE T-1				Operator Identification		
				Year		
				Month		
				AIR TAXI/COMMERCIAL CERTIFICATE NUMBER		
ADDRESS CORRECTION REQUESTED				Page of	f Pages	
OPERATIONS DURING 12-MONTH PERIOD COVERE				-	ruges	
DEPARTURE AIRPORT				ENPLANEMENTS		
СІТҮ	STATE	AIRPORT NAME	LOCATION IDENTIFIER	NUMBER OF SCHEDULED ENPLANEMENTS (See Instructions)	NUMBER OF NONSCHEDULED ENPLANEMENTS (See Instructions)	
I certify, under penalty of perjury, that the information provided in this Airport Activity Survey (Form 1800-31) is true and correct to the best of my knowledge, information and belief.						
DATE TYPED NAME AND TITLE OF PREPARING OFFICIAL			SIGNATURE	SIGNATURE		