CERTIFICATION
Consumer Confidence Report (CCR)

Town of Leakesville
Public Water Supply Name
21000Z

List PWS ID #s for all Community Water Systems included in this CCR

The Federal Safe Drinking Water Act (SDWA) requires each Community public water system to develop and distribute a Consumer Confidence Report (CCR) to its customers each year. Depending on the population served by the public water system, this CCR must be mailed or delivered to the customers, published in a newspaper of local circulation, or provided to the customers upon request. Make sure you follow the proper procedures when distributing the CCR. You must mail, fax or email a copy of the CCR and Certification to MSDH. Please check all boxes that apply.

☐ Customers were informed of availability of CCR by: (Attach copy of publication, water bill or other)
  ☐ Advertisement in local paper (attach copy of advertisement)
  ☐ On water bills (attach copy of bill)
  ☐ Email message (MUST Email the message to the address below)
  ☐ Other

Date(s) customers were informed: __/__/__ __/__/__ __/__/__

☐ CCR was distributed by U.S. Postal Service or other direct delivery. Must specify other direct delivery methods used

Date Mailed/Distributed: __/__/__

☐ CCR was distributed by Email (MUST Email MSDH a copy) Date Emailed: __/__/__
  ☐ As a URL (Provide URL )
  ☐ As an attachment
  ☐ As text within the body of the email message

☒ CCR was published in local newspaper. (Attach copy of published CCR or proof of publication)
Name of Newspaper: Greene County Herald
Date Published: 6/1/17

☐ CCR was posted in public places. (Attach list of locations) Date Posted: __/__/__

☒ CCR was posted on a publicly accessible internet site at the following address (DIRECT URL REQUIRED):
cctrwater.net/leakesville-26521

CERTIFICATION
I hereby certify that the Consumer Confidence Report (CCR) has been distributed to the customers of this public water system in the form and manner identified above and that I used distribution methods allowed by the SDWA. I further certify that the information included in this CCR is true and correct and is consistent with the water quality monitoring data provided to the public water system officials by the Mississippi State Department of Health, Bureau of Public Water Supply

[Signature] Mayor

Name/Title (President, Mayor, Owner, etc.)

Date

Submission options (Select one method ONLY)

Mail: (U.S. Postal Service)
MSDH, Bureau of Public Water Supply
P.O. Box 1700
Jackson, MS 39215

Fax: (601) 576 - 7800

Email: water.reports@msdh.ms.gov

CCR Deadline to MSDH & Customers by July 1, 2017!
PROOF OF PUBLICATION

STATE OF MISSISSIPPI
COUNTY OF GREENE

Personally appeared before me, the authority, in and for the State and County aforesaid, GEORGE R. TURNER, who being duly sworn, on his oath deposes and states that he is the Editor/General Manager of the Greene County Herald, a newspaper published in the Town of Leakesville, County of Greene, State of Mississippi, and having a general circulation in Greene County, Mississippi.

Volume 19 No. 10 Dated 1st Day of June, 2017
Volume _______No. _______ Dated _______ Day of __________________, 2017
Volume _______No. _______ Dated _______ Day of __________________, 2017
Volume _______No. _______ Dated _______ Day of __________________, 2017
Volume _______No. _______ Dated _______ Day of __________________, 2017
Volume _______No. _______ Dated _______ Day of __________________, 2017

And I hereby certify that the several numbers of the newspapers containing the notice hereto attached, have been before me exhibited and examined, and I find publication thereof to have been correctly made as stated.

[Signature]
EDITOR

Sworn to and subscribed before me, this 1st day of June, 2017.

[Signature]
Joani McMillan
Notary Public

My Commission expires: December 9, 2019
2016 Drinking Water Quality Report

TOWN OF EAKESVILLE

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