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## Higher Education Operating Fund Budget Fiscal Year Ending June 30, 2019

Name of Institution:	University of Louisiana at Lafayette
Contact Person:	Jerry Luke LeBlanc
Telephone Number:	(337) 482-6235
The accompanying forms, statements, and explanations, comprised of 178 pages, numbered i to 174, have been approved by me. I hereby certify that the statements and figures on the accompanying forms are true and correct to the best of my knowledge. I further certify that all positions listed on this budget are vital to the program and mission of the institution.  Signature  E. Joseph Savoie  Name  President	