VERIFICATION

COMMONWEALTH OF KENTUCKY)) SS: COUNTY OF FAYETTE)

The undersigned, **Elaine K. Chambers**, being duly sworn, deposes and says she is the Director, Rates and Regulatory for Kentucky-American Water Company, Inc., that she has personal knowledge of the matters set forth in the responses for which she is identified as the witness, and the answers contained therein are true and correct to the best of her information, knowledge and belief.

6. Chambers Chambers

Subscribed and sworn to before me, a Notary Public in and before said County and Commonwealth, this \underline{q} day of April, 2019.

Christing & hpio & men (SEAL) Notary Public

My Commission Expires:

8/6/2022