Attachment VI-Facilities Maintenance									
Agency Name:	Captive Insurance Agency								
	FY25 Amount	Owning Agency	Physical Site Address	Physical Site Name	DIFS Fund	DIFS Program	DIFS Cost Center	DIFS Account	DIFS Project # (as applicable)
	Not Applicable								
	-								
	\$0								

RJ0\_FY25\_Attachment VI - Facilities Maintenance.xlsx