

## 2014-15 INTERNAL CONTROL CERTIFICATION

Dormitory Authority of the State of New York

Authority Name

Michael T. Corrigan

Vice President

515 Broadway

Authority Address

518-257-3000

Telephone Number

Karen E. Ehlinger

Name of Internal Control Officer

518-257-3331

Telephone Number

kehlinge@dasny.org

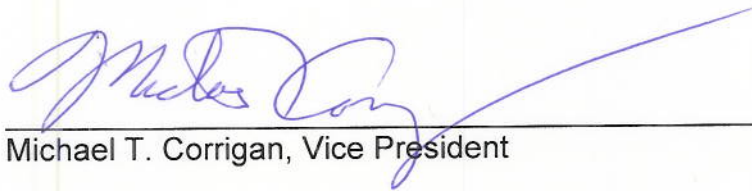
Email Address of Internal Control Officer

I hereby certify the authority is:

- Fully Compliant (Full compliance with all provisions)**
- Partially Compliant (Partial compliance with some or all provisions)**
- Not Compliant (Noncompliance with all provisions)**

with the New York State Governmental Accountability, Audit and Internal Control Act.

This certification is supported with detailed justification of actions taken and/or outlines specific actions needed to address areas of partial compliance or noncompliance as described in the preceding Internal Control Summary.



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Michael T. Corrigan, Vice President

6/18/2015

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Date