**Certification**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby certify that I personally read the Investment Policy and Guidelines of the Dormitory Authority State of New York, that all information provided in this Request for Proposal (“RFP”) is true and accurate to the best of my knowledge, and that I am authorized to release such information. All sales personnel will be routinely informed of DASNY’s investment objectives and Authorized Investors, and pledge to exercise due diligence in informing DASNY of all foreseeable risks associated with financial transactions conducted with our firm.

In the event of a material adverse change in the financial condition of our firm, we will notify DASNY immediately by telephone and in writing.

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Firm Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**