(DO NOT SUBMIT THIS PAGE WITH YOUR EDS. The purpose of this page is for you to recertify your EDS prior to submission to City Council or on the date of closing. If unable to recertify truthfully, the Disclosing Party must complete a new EDS with correct or corrected information)

**RECERTIFICATION**

Generally, for use with City Council matters. Not for City procurements unless requested.

This recertification is being submitted in connection with [identify the Matter]. Under penalty of perjury, the person signing below: (1) warrants that he/she is authorized to execute this EDS recertification on behalf of the Disclosing Party, (2) warrants that all certifications and statements contained in the Disclosing Party’s original EDS are true, accurate and complete as of the date furnished to the City and continue to be true, accurate and complete as of the date of this recertification, and (3) reaffirms its acknowledgments.

______________________________ Date: __________________

(Print or type legal name of Disclosing Party)

By:

______________________________

(sign here)

Print or type name of signatory:

______________________________

Title of signatory:

______________________________

Signed and sworn to before me on [date] ____________________, by ____________________, at ______________ County, ______________ [state].

______________________________ Notary Public.

Commission expires: ____________________.