



COMPLIANCE WITH OHIO REVISED CODE SECTION 2909.33
DECLARATION REGARDING ASSISTANCE TO TERRORIST ORGANIZATION

Name: Date: Address: City: State: Zip: Contract:

Part I: OBM Pre-certification Result (to be completed by Ohio Department of Development staff)
Individual or entity identified above is included in the OBM pre-certification database?
Yes (indicate DMA # from database): No (vendor must complete Part II):
Review Date: Review By:

Part II: Certification of DMA Compliance by Vendor, Grantee or Borrower

The Ohio Department of Development determined that the person or entity identified above was not listed in the DMA pre-certification database maintained by the Ohio Office of Budget and Management as of the database review date shown. Therefore, this certification must be completed and returned to the Ohio Department of Development to verify compliance with Ohio Rev. Code § 2909.33. Check only one:

The aggregate value of all business done with, and funds received from, the State or any of its political subdivisions by the person or entity identified above, including the value of the Department of Development contract identified above, is less than \$100,000 for the current fiscal year (July 1, 2009-June 30, 2010).

The person or entity identified above completed the on-line pre-certification with the Ohio Office of Budget and Management after the database review date shown above. For online pre-certification, go to http://business.ohio.gov/efiling/help/dma.stm

The person or entity identified above has completed the Declaration Regarding Material Assistance - No Assistance to a Terrorist Organization and is returning the Declaration with this certification. (Form available at http://www.publicsafety.ohio.gov/links/hIS0038.pdf)

The person or entity identified above is a federally insured depository institution or an affiliate of such a depository institution as further described in Ohio Rev. Code § 2909.33(H)(6).

The person or entity identified above is a State agency, instrumentality or political subdivision of the State.

Authorized representative of Vendor, Grantee or Borrower identified above:

By:
Printed Name:
Title: