(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 co [identify the Matter]. Under penalty of per he/she is authorized to execute this EDS re warrants that all certifications and statement are true, accurate and complete as of the data accurate and complete as of the data of this acknowledgments.	giury, the person signing certification on behalf ints contained in the Di ate furnished to the Cit	g below: of the Disclosing lay and con	(1) warrants that sclosing Party, (2) Party's original EDS attinue to be true,
	Date:		
(Print or type legal name of Disclosing Par	ty)		
By:			
(sign here)			
Print or type name of signatory:			
Title of signatory:			
Signed and sworn to before me on [date], at		_, by	F 3
, at	County,		[state].
	Notary Public.		
Commission expires:			