

CERTIFICATIONS

On behalf of the proposing organization named on Attachment A (Proposer)

Proposer Name:

1. The individual signing certifies that they are authorized to contract on behalf of the Proposer listed on Attachment A.
2. The individual signing certifies that all information in this proposal is true and correct, the document has been duly authorized by the governing body of the Proposer, and the Proposer will comply with the attached assurances if a contract is awarded.
3. The individual signing certifies that they have read and understand all the information in this Request for Proposal, including the cost reimbursement payment schedule and the programmatic and service delivery requirements.
4. The individual signing certifies that any financial or other relationships with CWP Board Members or Staff are disclosed below. Check here if there are none:

Disclosures: List the name and title of each person that has a relationship with a CWP Board or staff member and list the name and role of the person associated with CWP or Board member.

Name and title of Proposer's staff or board member who has or who's immediate family member or partner has a relationship with CWP Board or staff member.

Name of the CWP board or staff member and nature of the relationship (e.g., spouse, parent, child, sibling).

Name, Title

Name, Relationship

1.

1.

2.

2.

3.

3.

4.

4.

ATTACHMENT B – CERTIFICATIONS & ASSURANCES - Page 2

I recognize that I must give assurance for each item below. If I cannot, this proposal will be automatically rejected. The assurances are:

1. I am authorized by my Board of Directors, Trustees, other legally qualified officer, or as the owner of this CPA firm to submit this proposal.
2. We are not currently on any Federal, State of Connecticut, or local Debarment List.
3. We have not had a contract terminated for cause by any State of Connecticut government entity.
4. We will provide records to show that we are fiscally solvent, if needed.
5. We have all of the fiscal controls and accounting procedures needed to ensure that public/private funds will be used as required by law and contract.
6. We are not involved in any agreement to pay money or other consideration for the execution of this agreement, other than to an employee of our firm.
7. The prices in this proposal have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition.
8. The prices quoted in this proposal have not been knowingly disclosed by our firm.
9. There has been no attempt by our firm to discourage any other CPA Firm from submitting a proposal.
10. Our firm will provide oversight of the monitoring team will by a Certified Public Accountant licensed by the Connecticut State Board of Public Accountancy.
11. Our firm meets all of the general standards concerning qualifications, independence, due professional care and quality control as required by *Government Monitoring Standards*, including the requirements for continuing professional education and external peer reviews. (Please include copy of most recent review.)
12. I have read and understand all of the information in this Request for Proposal, including the information on the programs/grants/contracts to be monitored.
13. Neither our firm nor any individual to be assigned to the monitoring team has been found in violation of any state of AICPA professional standards or any potential conflict of interest. Should a violation be found during the contract period it will be disclosed.

I hereby attest that these certifications, disclosures and assurances are true.

Signature of Authorized Representative

Date

Printed Name of Authorized Representative

Title of Authorized Representative