

## APPLICATION CERTIFICATION

Legal Name of Organization:

I certify, to the best of my knowledge, that:

- 1. The information provided in this application is true and correct.
- 2. This organization does not support or engage in any terrorist activity; and
- 3. If a program-related investment is awarded to this organization, the proceeds of that program-related investment will not be distributed to or used to benefit any organization or individual supporting or engaged in terrorism, or used for any other unlawful purpose.

Signatures:

Authorized Officer

Date

Authorized Officer

Date