ASSURANCES 'Attachment C'

Organization/Agency Information:

I.

(Authorized Signature)

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		s:				-	
		nail:					
	Federa	l Tax I.D. #				_	
	Phone:			Fax:		-	
	Contac	t Person:					
	Area (s) to be served: (Please chec	ck all counties that	at apply)			
		Alexander Edwards Gallatin Hamilton Hardin		Johnson Massac Pope Pulaski Saline			Union Wabash Wayne White
On	hahalf	of the Offeror:					
C. D. E. F. G.	consultation, communication, or agreement, for the purpose of restricting competition. D. The individual signing certifies that there has been no attempt by the Offeror to discourage any potential Offeror from submitting a proposal. E. The individual signing certifies that he/she has read and understands all of the information in this Request for Proposal. F. The individual signing certifies that the Offeror, and any individuals to be assigned to the program, has not been debarred or suspended from doing work with any federal, state or local government. G. The Offeror shall agree to make all programmatic and fiscal records related to the operation of this contract available to staff of the Southern 14 Workforce Investment Board, Inc. and state and federal auditors and monitors for the purposes of monitoring and oversight. H. The Offeror agrees to keep all client information generated through the operation of this program in strict confidence. Other than the reports submitted to the Southern 14 Workforce Investment Board, the Offeror agrees not to publish, reproduce, or otherwise divulge such information in whole or in part, in any manner or form or authorize or permit others to do so without the express written consent of the Southern 14 Workforce Investment Board, Inc. The Offeror shall take such reasonable measures as are necessary to restrict access to all information to those employees on the Offeror's staff and linking agencies who must have the information on a "need-to-know" basis. The Offeror agrees to immediately notify, in writing, the Southern 14 Workforce Investment Board's authorized representative in the event the Offeror determines or has reason to suspect a breach of this requirement.						
Da	nted thi	sday of _		_2016			
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(Printed Name and Position)