ASSURANCES

	8	nization/Agency Inform					
]	Name:						
4	Addres	ss:					
]	Email:	·					
]	Federa	nl Tax I.D. #				_	
]	Phone:			Fax:			
(Contac	ct Person:					
1	Area ((s) to be served: (Please of	check all counties that	at apply)			
		Alexander		Johnson	C		Union
		Edwards		Massac	Ε		Wabash
		Gallatin		Pope			Wayne
		Hamilton Hardin		Pulaski Saline			White
D. E. F. G.	subn The deba The to st purp The Othe repro	nitting a proposal. individual signing certifies individual signing certifie urred or suspended from do Offeror shall agree to make aff of the Southern 14 Wo osses of monitoring and ove Offeror agrees to keep all c er than the reports submitte oduce, or otherwise divulgers to do so without the exp	that he/she has read ar s that the Offeror, and sing work with any fed e all programmatic and orkforce Investment B ersight. lient information gene d to the Southern 14 W e such information in ress written consent of	attempt by the Offeror to dis ad understands all of the infor d any individuals to be assi- leral, state or local governm l fiscal records related to the coard, Inc. and state and fec- trated through the operation of Workforce Investment Board whole or in part, in any mar f the Southern 14 Workforce to restrict access to all info	rmation in this Re gned to the prog ent. operation of this deral auditors and of this program in d, the Offeror agr inner or form or a e Investment Boar	eques gram, s cont d mc n stri- cees r sutho rd, In	at for Proposal. , has not been tract available onitors for the ct confidence. not to publish, rize or permit c. The Offeror
I. Da	Offe imm th Resp the C	ror's staff and linking agen ediately notify, in writing, he Offeror determines or he pondents to this RFP who al	cies who must have th the Southern 14 Work as reason to suspect a lso hold a position on t tions contained in the	e information on a "need-to- force Investment Board's au breach of this requirement. the Southern 14 Workforce I By-Laws of that organizatio	know" basis. The thorized represent investment Board	e Off ntativ	feror agrees to ve in the event

(Authorized Signature)

(Printed Name and Position)