Mandatory Disclosure

Award applicants and recipients of awards from the State of Illinois (collectively referred to herein as "Grantee") must disclose, in a timely manner and in writing to the State awarding agency, all violations of State or federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the award. *See* 30 ILCS 708/40; 44 Ill. Admin. Code § 7000.40(b)(4); 2 CFR § 200.113. Failure to make the required disclosures may result in remedial action.

Are there any violations of State or federal criminal law involving fraud, brilaffecting the awarding of a grant to your organization? $\ \ \ \square$ No	bery, or gratuity violations potentially
If there any violations of State or federal criminal law involving fraud, bribe affecting the awarding of a grant to your organization, please describe there	
Grantee has a continuing duty to disclose to the Department of Commerce "Department") all violations of criminal law involving fraud, bribery or gratugrant award.	
By signing this document, below, as the duly authorized representative of t	he Grantee, I hereby certify that:
 All of the statements in this Mandatory Disclosure form are true, my knowledge. I am aware that any false, fictitious, or fraudule me to criminal, civil or administrative penalties. (U.S. Code, Title 	nt statements or claims may subject
 There is no action, suit or proceeding at law or in equity pending knowledge, threatened, against or affecting the Grantee, before or administrative agency, which will have a material adverse effective grant award. 	any court or before any governmental
 Grantee is not currently operating under or subject to any cease informal or formal regulatory action, and, to the best of the Granthe subject of any investigation by any state or federal regulator 	ntee's knowledge, it is not currently
 If Grantee becomes the subject of an action, suit or proceeding a material adverse effect on the performance required by an award federal regulatory, law enforcement or legal authority, Grantee s in writing. 	d, or an investigation by any state or
Grantee Organization (Company Name)	
Signature of Authorized Representative	Date
Printed Name (Authorized Signator Name)	-

Printed Title (Authorized Signator Title)

CFSA Number