

Section VII - Certification of Report by the Chief Administrative Officer of the Municipality

INSTRUCTIONS: Review the instructions for the completion of this report specified in Section III, the information entered in each of the applicable sections of the reporting form and the information provided in the applicable schedules. Then complete the certification below and return the original reporting form to the Commission. *Retain a copy of the completed reporting form for audit compliance purposes.*

Note: To be completed by the person officially designated as the Chief Administrative Officer of the municipality under Act 205 of 1984.

I hereby certify that to the best of my knowledge the information provided in this report is complete, true and accurate.

(Signature of Chief Administrative Officer)

(Date)

(Name of Chief Administrative Officer) (Print or Type)

(Telephone)

Inquiries regarding completion or submission of the reporting form may be directed to:

**Commonwealth of Pennsylvania
Public Employee Retirement Commission**

Mailing Address
**P.O. Box 1429
Harrisburg, PA 17105-1429**

Phone: (717) 783-6100
Fax: (717) 787-9531
E-mail: perc@state.pa.us

Sample Act 205 for Illustration Purposes Only