



SMALL BUSINESS BORROWER CERTIFICATION

(Note: A signed certification is required from every borrower and each owner of a business, farm, or entity applying for MOBUCK\$ benefits.)

I, _____ (print name), have reviewed the statutory and regulatory requirements to participate in the MOBUCK\$ Linked Deposit Loan Program and do hereby certify that:

1. I, or an entity in which I have an ownership interest, am applying to receive a MOBUCK\$ Linked Deposit loan;
2. I have not pleaded guilty to, been found guilty of, nor am I currently incarcerated, on probation, or on parole for a felony conviction or a crime of moral turpitude;
3. I am not currently facing charges for a felony or a crime of moral turpitude and am not currently on probation or parole for any crime;
4. I have read and verify that I am not in violation of the Treasurer's Conflict of Interest Policy, which can be accessed at the following link: (www.treasurer.mo.gov/policiesandinformation.aspx);
5. I am not the subject of a current complaint/violation filed with the Missouri Department of Natural Resources; the Office of the Missouri Attorney General; the Missouri Department of Labor and Industrial Relations; and/or the Occupational Safety and Health Administration (OSHA);
6. I understand that by participating in the MOBUCK\$ Linked Deposit Program I am subject to all Revised Statutes of Missouri related to receiving state monies;
7. I understand that information related to this linked deposit application may be released subject to a public records request;
8. I understand that, if approved, information related to this linked deposit application, such as business name, loan amount, estimated savings, etc. may be released without further notice in the promotion of the MOBUCK\$ linked deposit program;
9. I have reviewed the ineligible borrowers list that can be accessed on the State Treasurer's Office Website at the following link: www.treasurer.mo.gov/IneligibleBorrowers.aspx;
10. I am not an ineligible borrower;
11. The information provided in this document is true and accurate to the best of my knowledge and material to the review of the related application;

12. I understand that knowingly making a false statement on my application for a MOBUCK\$ Linked Deposit Program Loan constitutes a **Class A misdemeanor** under Section 575.050, RSMo, and **may be punishable by up to one year of imprisonment**, as outlined in Section 558.011, RSMo.

I agree to notify my lending institution in writing if, at any time during the term of my MOBUCK\$ Linked Deposit Program loan, there is a change in my status with respect to any of the certifications previously provided. Furthermore, I agree to notify my lending institution in writing if I become ineligible to participate in the MOBUCK\$ Linked Deposit Program. Failure to provide such notification within ten (10) business days of the status change will result in the immediate cancellation of my participation in the program and forfeiture of any associated benefits.

Please confirm the physical address of your business or farm:

Address: _____

City: _____

County: (please provide all counties, if applicable): _____

State: _____ Zip: _____

Signature of Applicant

Print Full Name

Date of Birth

Name of Business, Farm or Entity on loan application