The Grantee acknowledges that the following personnel are Key Persons of the Grantee:

(1) Name__________________________________________  
(Print or type Name above line)  
Title with Grantee ____________________________________  
Is the Key Person a retiree who receives a pension from the Michigan State Employees Retirement System? Yes____ / No_______

(2) Name__________________________________________  
(Print or type Name above line)  
Title with Grantee ____________________________________  
Is the Key Person a retiree who receives a pension from the Michigan State Employees Retirement System? Yes____ / No_______

(3) Name__________________________________________  
(Print or type Name above line)  
Title with Grantee ____________________________________  
Is the Key Person a retiree who receives a pension from the Michigan State Employees Retirement System? Yes____ / No_______

Print or Type Grantee Name Above Line

By: ____________________________________________ Date

Name of Signatory for Grantee: ____________________________  
(Print/Type Name of Signatory Above Line)

Its: ________________________________________________

Federal Identification Number: ________________________

Pensioned Retirees (2007, MCL 38.68) (12/7/07 Rev)  
Exhibit - Certificate Verifying Key Persons of the Contractor