

## CORONAVIRUS RELIEF FUND ACCEPTANCE CERTIFICATION

I, \_\_\_\_\_, certify that I am the chief executive officer (Chief Executive) of \_\_\_\_\_, Illinois (Participant) and, on behalf of the Participant, I hereby certify, represent, warrant and agree that:

1. I have the authority to bind the Participant by this certification and to make each related request seeking direct payment and/or reimbursement (each a CARES Act Request whether now or hereafter requested) from the Coronavirus Relief Fund Program (CRF Program) created by Will County, Illinois; and
2. All CRF Program funds (and each CARES Act Request) are subject to section 601(a) of the Social Security Act, as added by Section 5001 of the Coronavirus Aid, Relief, and Economic Security Act (CARES Act); and
3. Will County is authorized to rely upon this certification as a material representation made by the Participant (and by me, as the Chief Executive Officer of the Participant) in connection with each CARES Act Request; and
4. Each CARES Act Request meets the CARES Act qualifications and requirements including but not limited to that:
  - a. All expense payment and reimbursement requests only qualify if: (i) necessary expenditures directly incurred due to the public health emergency with respect to the Coronavirus Disease 2019 (COVID-19); (ii) such are not being accounted for in the budget most recently approved as of March 27, 2020, for the Participant; and (iii) having been incurred during the period that begins March 1, 2020 and ends on December 30, 2020; and
  - b. Each CARES Act Request adheres to federal guidance issued or to be issued on what constitutes a necessary expenditure; and
  - c. Each CARES Act Request is submitted with appropriate documentation, including payroll records, invoices, sales receipts, etc.; and
  - d. CRF Program funds as made available by any CARES Act Request are not used as a revenue replacement for lower than expected tax or other revenue collections; and
  - e. CRF Program funds as made available by any CARES Act Request are not used to reimburse or pay expenditures for which any other emergency COVID-19 supplemental funding (whether state, federal or private in nature) was received for the same expense.
5. Failure of any CARES Act Request to meet any CARES Act qualifications and requirements (or if there is any misrepresentation made by the Participant related to this certification) shall require, upon any request of Will County, that the Participant repay to Will County the related CRF Program funds.
6. To the extent that any CARES Act Request submitted by the Participant seeks to pay or reimburse any COVID-19 related expenses incurred by another political subdivision

