**Attestation of Subordinated Debt Arrangement**

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contract Number: H\_\_\_\_\_\_

Please Check Item A or B:

1. I attest that (name of PACE organization) does not \_\_\_have a subordinated debt arrangement with another entity.
2. I attest that (name of PACE organization) does \_\_\_ have a subordinated debt arrangement with another entity.

Description of Subordinated Debt Arrangement:

(If not enough space, please describe on separate sheet of paper.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Print Name of Company Official) (Date)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature of Company Official)