

PROPOSAL REQUIREMENT # 2
AS APPLICABLE
OWNERSHIP DISCLOSURE CERTIFICATION

Name of Business: E. Rate Consulting, Inc.

that the list below contains the names and home addresses of all stockholders holding 10% or more of the issued and outstanding stock of the undersigned business organization.
OR

I certify that the bidder is a corporation and the list below contains the names and addresses of all stockholders who own 10% or more of the stock of any class of the corporation.
OR


I certify that no one stockholder owns 10% or more of the issued and outstanding stock of the undersigned.

Check the box that represents the type of business organization: I certify

Partnership Corporation Sole Proprietorship Limited Partnership

Limited Liability Corporation Limited Liability Partnership Subchapter S Corporation

Sign and notarize the form below, and, if necessary, complete the stockholder list below and copy form if additional space is needed).

Name: <u>Vincent</u>	Name:
Home Address: <u>180 Hollywood Avenue Fairfield, NJ 07004</u>	Home Address:
Name:	Name:
Home Address:	Home Address:
Name:	Name:
Home Address:	Home Address:
Subscribed and sworn before me this <u>8th</u> day of <u>may</u> , 20 <u>17</u>	 _____ (Affiant)
(Notary Public) My Commission expires: <u>Sept. 9, 2021</u>	<u>Vincent LaForgia, President</u> (Print name & title of affiant) <u>E. Rate Consulting, Inc.</u> (Name of business) (Corporate Seal)

RACHEL MOTYL
 NOTARY PUBLIC
 STATE OF NEW JERSEY
 ID # 50045547

MY COMMISSION EXPIRES SEPT. 9, 2021