



Please EMAIL applications & questions
to
bond.finance@education.ohio.gov

School District Name: _____ County: _____

Bond Series Name: _____

PAYING AGENT CERTIFICATION

As the signatory authority for the paying agent stated below, and in accordance with Ohio Administrative Code 3301-08-01(E)(6), I hereby acknowledge and certify:

1. I am not an officer or employee of the school district issuing the bonds described above for which this bond registrar agreement and this certification apply.
2. The paying agent has set up the state of Ohio Supplier ID for the “remit to” location detailed below to enable the Ohio Department of Education and Workforce (Department) to make any payments required in accordance with this bond registrar agreement via electronic funds transfer (EFT).
3. The paying agent will maintain this Supplier ID, or any subsequently required ID with Ohio Shared Services, or any subsequently designee of the Ohio Office of Budget and Management, for the life of the bond registrar agreement.
4. Upon notification from the school district of any potential for insufficiency, the paying agent will contact Ohio Shared Services, or any subsequent designee, to verify the Supplier ID below is still valid and the banking information for EFT is still current so the Department may transfer funds to the paying agent via EFT within the specified timeframes. If the Supplier ID has not been properly maintained, the paying agent will take immediate corrective action(s).

Paying Agent: _____

Supplier ID for Remit to Address: _____ Tax Payer ID: _____

Paying Agent Remit to Address: _____

City: _____ State: _____ Zip Code: _____

Authorized Signor Printed Name _____ Phone: _____

Signature: _____ Date: _____