



Agency Information

EIN: _____

Agency Name: _____

Address: _____

ANTI-TERRORISM COMPLIANCE MEASURES

In compliance with the UNITED STATES PATRIOT ACT and other counterterrorism laws, the regulations governing the New York SEFA Council requires that each agency annually certify the following:

“I hereby certify on behalf of:

(INSERT AGENCY NAME)

that all SEFA funds and donations will be used in compliance with all applicable Anti-terrorist financing and asset control laws, statutes, and executive orders.”

Please type or print in ink. All fields are required to process your application.

President/ CEO/ Executive Director or Board Officer

Print Name: _____ Title: _____

Signature: _____ Date: _____

Email Address: _____

***Please upload this form with your New Agency Application or Agency Recertification.**