

RBHA
RELATED PARTY TRANSACTIONS CERTIFICATION

Name of Preparer: _____

Related Party Transactions For The Contract Year Ended: _____

Contract Number: _____

I hereby attest that the information contained in the Related Party Transactions Report is current, complete and accurate to the best of my knowledge. I also attest that these reported transactions are reasonable, will not impact on the fiscal soundness of the RBHA, and are without conflict of interest. I understand that whoever knowingly and willfully makes or causes be made a false statement on the statement may be prosecuted under applicable federal and/or state laws. In addition, knowing and willfully failing to fully and accurately disclose the information requested may result in denial of a request to participate or where the RBHA already participates in the agreement may terminate the agreement or contract with ADHS/DBHS.

Date Signed_____
Chief Financial Officer

RBHA RELATED PARTY TRANSACTIONS

1. **Board of Directors:** List the Names/Titles and Addresses of the Board of Directors of the RBHA:

Name/Title	Address

2. **Related Party Transactions:** Describe transactions between the RBHA and any related party in which a transaction or series of transactions during any one fiscal year exceeds the lesser of \$10,000 or 2% of the total operating expenses of the disclosing entity. List property, goods, services and facilities in detail noting the dollar amounts or other consideration for each transaction and the date thereof. Include a justification as to (1) the reasonableness of the transaction, (2) its potential adverse impact on the fiscal soundness of the disclosing entity, and (3) that the transaction is without conflict of interest:

a) The sale, exchange or leasing of any property:

Description of Transaction	Name of Related Party And Relationship	Dollar Amount for Reporting Period

Justification:

b) The furnishing of goods, services or facilities for consideration:

Description of Transaction	Name of Related Party And Relationship	Dollar Amount for Reporting Period

Justification:

c) Describe all transactions between the RBHA and any related party which includes the lending of money, extensions of credit or any investment in a related party. This type of transaction requires review and approval in advance by the ADHS Director:

Description of Transaction	Name of Related Party And Relationship	Dollar Amount for Reporting Period

Justification:

d) List the Name and Address of any individual who owns or controls more than 10% of stock or that has a controlling interest (i.e. formulates, determines or vetoes business policy decisions):

Name	Address	Owner or Controller	Has Controlling Interest? Yes/No