**Minnesota Department of [Name]**

# CERTIFICATE OF ACCURACY OF THE MAILING LIST

## Proposed Rules Governing [Topic], Minnesota Rules, [citation]; Revisor’s ID Number [number]

I certify that the list of persons and associations who have requested that their names be placed on the Department of [Name] rulemaking mailing list under Minnesota Statutes, section 14.14, subdivision 1a, is accurate, complete, and current as of [Month] [Date], [Year]\*. [A copy of the mailing list is attached to this Certificate. (Note: attaching a copy is optional.)]

[Name]

[Title]

\*Make sure this is NOT a field that changes automatically in case you have to print another copy
For the certificate author: Do not use returns to add spacing between paragraphs; use the Normal styles (above) or the paragraph tool.) Do not forget to delete this information.