

NOTIFICATION TO BROKER AND CERTIFICATION

_____ **RELIEF ASSOCIATION** (Fill in relief association name)

This section of the form is to be completed by a Relief Association Officer

I. Broker Information

- 1. Name of Firm: _____
- 2. Address: (Local) _____
- 3. Telephone Number: Local _____ National _____
- 4. Primary Representative/Manager/Partner in charge:

Name and Title Telephone Number

Email Address

II. Statement of Investment Restrictions

To: _____ (Name of Broker)
The _____ Relief Association is authorized to invest only in those investments complying with the requirements of Minn. Stat §§ 356A.06, 356.64 and 424A.095.

Signature of Relief Association Officer Date

III. Statement Of Additional Investment Restrictions

The _____ Relief Association further restricts its investments as provided in the attached investment policy. The Relief Association will provide to the broker copies of any amendments or changes to the investment policy.

Signature of Relief Association Officer Date

This section of the form is to be completed by the Broker

IV. Security Broker Insurance Coverage (Check applicable box)

- I certify that we have obtained sufficient SIPC insurance and excess SIPC insurance to cover assets held by our Firm for the Relief Association.
- OR**
- None of the relief association's assets are in custody with our firm, or the assets are in a commingled investment vehicle.
- OR**
- Our firm is not a security broker or the agent of a security broker.

Signature of Authorized Representative of Broker Date

V. Certification

We acknowledge receipt of the statement of investment restrictions and agree to conduct your investment transactions in accordance with Minn. Stat. §§ 356A.06, 356.64 and 424A.095 and the provisions of any additional restrictions set forth in Section III above.

Signature of Authorized Representative of Broker Date

This form is required to be completed by a public pension plan official annually under Minn. Stat. § 356A.06, subd. 8b. The Office of the State Auditor (OSA) developed this form to assist volunteer fire relief associations that must inform their brokers of their investment restrictions, and obtain from their brokers a certification that investment transactions will be conducted in accordance with those restrictions. To complete this form, follow these steps:

1. Fill in the information requested in Section I that is known to you.
2. Fill in Sections II and III (if applicable) and attach copies of your investment policy and any governing board resolutions that restrict your investments.
3. Mail the form to your broker with instructions to fill in any blanks in Section I, sign Sections IV and V, and return the completed form to you.
4. Keep a copy of the completed BC-1 Form in your files and submit a copy to the Office of the State Auditor.

For purposes of this form, a "broker" means a broker, broker-dealer, investment advisor, investment manager, or third party agent who transfers, purchases, sells, or obtains investment securities for, or on behalf of, a covered pension plan.

Note: If you change your investment policy or your Board of Trustees adopts any resolutions affecting future investments, your broker should be notified of the change. To avoid confusion, your broker should receive written notification and copies of that correspondence should be kept on file with this form.