

## CERTIFICATION OF NON-INVOLVEMENT IN PROHIBITED ACTIVITIES IN RUSSIA OR BELARUS

SHORT DESCRIPTION	Health Department Workforce Development Plan
REQUISITION No./CONTRACT No.	
including a local government agency, for the provision of g indicating whether or not the Vendor is identified on the available here; https://sanctionssearch.ofac.treas.gov/, If the Co	person or entity (hereinafter "Vendor") that seeks to enter into or renew a contract with a State agency, goods or services, or the purchase of bonds or other obligations, must complete the certification below Office of Foreign Assets Control (OFAC) Specially Designated Nationals and Blocked Persons list, ounty of Passaic finds that a Vendor has made a certification in violation of the law, it shall take any action at, including but not limited to, imposing sanctions, seeking compliance, recovering damages, declaring the arty.
	CERTIFICATION
I, the undersigned, certify that I have read the definition of "Vo Nationals and Blocked Persons list, and having done so certify	'endor" below, and have reviewed the Office of Foreign Assets Control (OFAC) Specially Designated y:
	(Check the Appropriate Box)
and/or Belarus.	AC Specially Designated Nationals and Blocked Persons list on account of activity related to Russia
B. That I am unable to certify as to "A" above, fist on account of activity related to Russia a	, because the Vendor is identified on the OFAC Specially Designated Nationals and Blocked Persons and/or Belarus
Persons list. However, the Vendor is engag	e, because the Vendor is identified on the OFAC Specially <u>Designated Nationals and Blocked</u> ged in activity related to Russia and/or Belarus consistent with federal law, regulation, license or the Vendor's activity related to Russia and/or Belarus is consistent with federal law is set forth
This	(Attach Additional Sheets if Necessary.) 6/04/2025
Signature of Ventor's Authorized Representative	Date
Trevor J. Weigle, Director of Finance/Co-own	ner 87-0884240 Vendor's FEIN, EIN or FTIN
Print Name and Title of Vendor's Authorized Representative	212-547-9840
Strategic Health Advisers, LLC	Vendor's Phone Number
Vendor's Name 13 Municipal Plaza, Unit 251	None
Vendor's Address (Street Address)	Vendor's Fax Number
Bloomfield, NJ 07003	info@strategichealthadvisers.com
Vandaria Address (City/State/Zin Code)	Vendor's Email Address

## Definitions:

Vendor means: (1) A natural person, corporation, company, limited partnership, limited liability partnership, limited liability company, business association, sole proprietorship, joint venture, partnership, society, trust, or any other nongovernmental entity, organization, or group; (2) Any governmental entity or instrumentality of a government, including a multilateral development institution, as defined in Section 1701(c)(3) of the International Financial Institutions Act. 22 U.S.C. 262r(c)(3); or (3) Any parent, successor, subunit, direct or indirect subsidiary, or any entity under common ownership or control with, any entity described in paragraph (1) or (2).