[Dates, names, and other information should be changed to reflect your agency’s submission.]

# Certificate of Accuracy of the Mailing List

**Minnesota [Agency Name]**

**Proposed [Permanent] Rules Relating to [Topic], Minnesota Rules, [citation]; Revisor’s ID No. [number]; [OAH Docket No. [number]]**

I certify that the list of persons that have requested that their names be placed on the [Agency Name]’s rulemaking list under Minnesota Statutes, section 14.14, subdivision 1a, is accurate, complete, and current as of [date] [date should be close to when rule notice is sent]. [Optional: A copy of the mailing list is attached to this Certificate.]

[Name]

[Title]