



**THE RETIREMENT BOARD
OF THE COUNTY EMPLOYEES' AND OFFICERS' ANNUITY AND BENEFIT FUND
OF COOK COUNTY AND EX OFFICIO FOR THE FOREST PRESERVE DISTRICT
EMPLOYEES' ANNUITY AND BENEFIT FUND OF COOK COUNTY**

AFFIRMATION STATEMENT

ATTACHMENT B

ISSUED ON: June 6, 2025

AFFIRMATION STATEMENT

Responder affirms the following as proof of qualifications and conditions for submitting a proposal:

- | | <u>Confirm</u> |
|---|--------------------------|
| A. The Responder must agree to act as a fiduciary to the Cook County Pension Fund. | <input type="checkbox"/> |
| B. Responder must review and be able to comply with the terms of the Fund's Statement of Investment Policy. (Attachment A). | <input type="checkbox"/> |
| C. Responder must be a registered investment advisor under the Investment Advisers Act of 1940 as required under Section 1-113.14 and Section 1-101.4 of the Illinois Pension Code. | <input type="checkbox"/> |
| D. Responder must meet the minimum requirements as outlined in the RFP document. | <input type="checkbox"/> |
| E. Responder may not be represented by a third-party marketing agent on a contingent fee basis and may not pay any direct or indirect fees in relation to the Fund account (i.e., no solicitation fees). | <input type="checkbox"/> |
| F. The Responder must be familiar with and be prepared to comply with Articles 1, and 9 of the Illinois Pension Code. | <input type="checkbox"/> |
| G. Responder must be willing to comply with certain disclosure requirements mandated under the Illinois Pension Code and agrees to provide the following: | <input type="checkbox"/> |
| <div style="margin-left: 40px;">i. disclosure of the method for charging and measuring fees, based on the assets under management, including disclosure of the direct and indirect fees, commissions, penalties, and other compensation, including reimbursement for expenses that may be paid by or on behalf of the Responder in connection with the provision of investment consulting services to the Fund;</div> | |
| <div style="margin-left: 40px;">ii. the names and addresses of the Responder, including any entity that is a parent of, or owns a controlling interest in, the Responder; any entity that is a subsidiary of, or in which a controlling interest is owned by, the Responder; any persons who have an ownership or distributive income share in the Responder that is in excess of 7.5%; or serves as an executive officer of the Responder; and</div> | |
| <div style="margin-left: 40px;">iii. the names and addresses of all subcontractors, if any, and the expected amount of money each will receive under the contract. For purposes of this disclosure, "subcontractor" does not include non-investment related professionals or professionals offering services that are not directly related</div> | |

to the investment of assets, such as legal counsel, actuary, proxy voting services, services used to track compliance with legal standards, and investment fund of funds where the Board has no direct contractual relationship with the investment managers or partnerships.

H. Responder must be willing to comply with certain disclosure requirements mandated under the Illinois Pension Code, specifically Sections 1-113.14(c)(5) and 1-113.21 (Attachment C). ☐

I. Responder must review and be able to execute the sample proposed form of transition management agreement with the Fund (Attachment D). ☐

I attest that the above information is correct and the representations made in this request for proposal to be true and accurate to the best of my ability.

Name

Title

Signature

Date

Note: This Affirmation Statement must be signed by an officer or a designated agent empowered to bind the firm in a contract.
