

Exhibit 7

**Annual Compliance Certification for Custodial Inventory (CI) Program
(For requirements, refer to MOP 7.0)**

Name of Depository Institution: _____ ("Institution")

Location of CI Site: _____ ("CI Site")

Date of Last Management Audit: _____

Audited by: _____

By signing below, I hereby certify that the Institution is in compliance with all requirements of the Manual of Procedures and Appendix 1(Custodial Inventory Program) to Operating Circular 2, Cash Services. In addition, the Institution has attached or previously provided to the Reserve Bank the summary of the results of internal and external audits as they pertain to the CI Program.

The signer below must be the Institution's Senior Cash Officer with responsibility at least one level over the CI Remote Vault Manager.

Signature: _____

Print Name: _____

Title: _____

Dated: _____