



RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract

Page 25

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. Arthur J. Gallagher Risk Management Services, LLC  
Company Submitting Bid/Proposal

2. Please select one of the following:  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

4. BY: Christopher R. Ward  
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Christopher R. Ward  
Printed Name of Authorized Officer or Agent  
Area President  
Title of Authorized Officer or Agent of Contractor

18 day of March, 2024  
[Signature]  
Notary Public

Note: See Gwinnett County Code of Ethics Ordinance EO2011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)





RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract

Page 25

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. EPIC Insurance Brokers & Consultants  
Company Submitting Bid/Proposal

2. Please select one of the following:  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

4. BY: Stephen Adkins  
Authorized Officer or Agent Signature

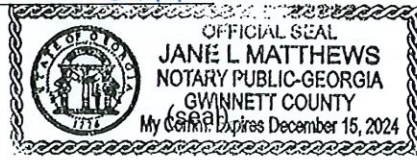
Sworn to and subscribed before me this

Stephen Adkins  
Printed Name of Authorized Officer or Agent

21 day of March, 2024

Chief Operating Officer, Southeast Region  
Title of Authorized Officer or Agent of Contractor

Jane L. Matthews  
Notary Public



Note: See Gwinnett County Code of Ethics Ordinance EO2011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)



RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract  
Page 25

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. HUB International New England, LLC  
Company Submitting Bid/Proposal

2. Please select one of the following:  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name  
  
\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name  
  
\_\_\_\_\_  
Gwinnett County Elected Official Name

4. BY:   
Authorized Officer or Agent Signature

Robert Romanos  
Printed Name of Authorized Officer or Agent  
Vice President  
Title of Authorized Officer or Agent of Contractor

Sworn to and subscribed before me this

18<sup>th</sup> day of March, 2024

Connie Hagan Boyer  
Notary Public



Note: See Gwinnett County Code of Ethics Ordinance E02011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)

Proud Winner of the Annual *Achievement of Excellence Award* in Procurement since 1999



RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract  
Page 25

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. McGriff Insurance Services, LLC  
Company Submitting Bid/Proposal

2. Please select one of the following:  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name  
  
\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name  
  
\_\_\_\_\_  
Gwinnett County Elected Official Name

4. BY: [Signature]  
Authorized Officer or Agent Signature

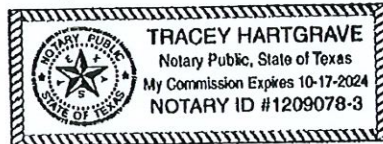
Sworn to and subscribed before me this

Johnny Fontenot  
Printed Name of Authorized Officer or Agent

19th day of March, 2024

Senior Executive Vice President  
Title of Authorized Officer or Agent of Contractor

[Signature]  
Notary Public



(seal)

Note: See Gwinnett County Code of Ethics Ordinance EO2011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)





### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. Southeast Series of Lockton Companies, LLC  
Company Submitting Bid/Proposal

2. Please select one of the following:  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

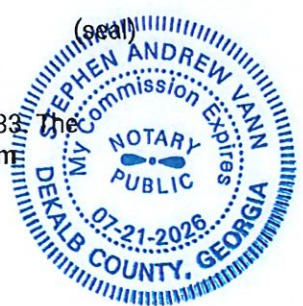
4. BY: [Signature]  
Authorized Officer or Agent Signature

Sworn to and subscribed before me this  
21 day of March, 2024

Jeff Showalter  
Printed Name of Authorized Officer or Agent  
Senior Vice President  
Title of Authorized Officer or Agent of Contractor

[Signature]  
Notary Public

Note: See Gwinnett County Code of Ethics Ordinance E02011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)





RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. T. Hudson Risk Advisors, LLC  
Company Submitting Bid/Proposal

- 2. Please select one of the following:
  - No information to disclose (complete only section 4 below)
  - Disclosed information below (complete section 3 & section 4 below)


3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

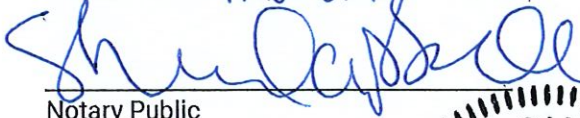
4. BY:   
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

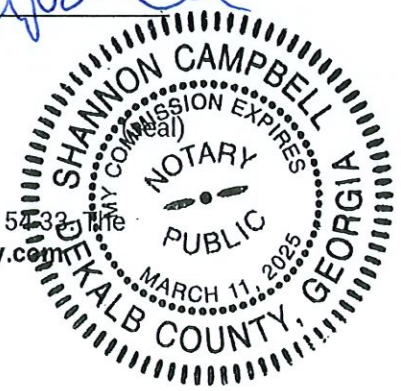
TODD KOHOUT  
Printed Name of Authorized Officer or Agent

20 day of March, 2024

CEO  
Title of Authorized Officer or Agent of Contractor

  
Notary Public

Note: See Gwinnett County Code of Ethics Ordinance E02011, Sec. 54-33. This ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)







RP008-24, Provision of Property and Casualty Insurance Coverage/Services on an Annual Contract

Page 25

### CODE OF ETHICS AFFIDAVIT

PLEASE RETURN THIS FORM COMPLETED WITH YOUR SUBMITTAL. SUBMITTED FORMS ARE REQUIRED PRIOR TO EVALUATION.

In accordance with Section 54-33 of the Gwinnett County Code of Ordinances the undersigned bidder/proposer makes the following full and complete disclosure under oath, to the best of their knowledge, of the name(s) of all elected officials whom it employs or who have a direct or indirect pecuniary interest in or with the vendor, its affiliates or its subcontractors:

1. WILLIS TOWERS WATSON SOUTHEAST, INC.  
Company Submitting Bid/Proposal

- 2. Please select one of the following:
  - No information to disclose (complete only section 4 below)
  - Disclosed information below (complete section 3 & section 4 below)

3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

4. BY:   
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

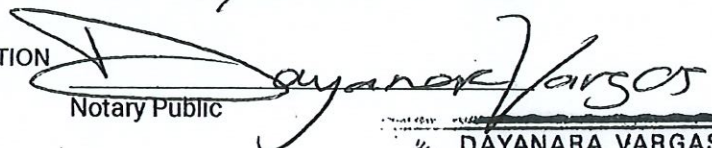
TAMIKA PUCKETT

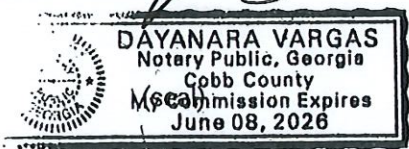
13 day of March, 2024

Printed Name of Authorized Officer or Agent

EAST REGION LEADER, PUBLIC SECTOR & EDUCATION

Title of Authorized Officer or Agent of Contractor

  
Notary Public



Note: See Gwinnett County Code of Ethics Ordinance E02011, Sec. 54-33. The ordinance will be available to view in its' entirety at [GwinnettCounty.com](http://GwinnettCounty.com)