



Gwinnett

WINNETT COUNTY
DEPARTMENT OF FINANCIAL SERVICES
PURCHASING DIVISION

75 Langley Drive | Lawrenceville, GA 30046-6935
 O: 770.822.8720 | F: 770.822.8735
GwinnettCounty.com

BL093-25, Provision of Respite & Personal Care Services for Gwinnett County Residents
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 bidder/proposer, its affiliates or its subcontractors:

1. A Circle Of Love Home Care

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

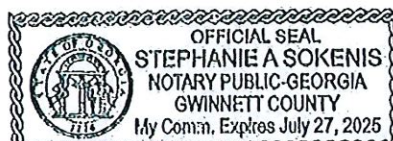
Sworn to and subscribed before me this

Cara Tunney
 Printed Name of Authorized Officer or Agent

18 day of July, 2025

CFO
 Title of Authorized Officer or Agent of Contractor

[Signature]
 Notary Public



(seal)

Note: See Gwinnett County Code of Ethics Ordinance EO2014, Sec. 54-33. The ordinance will be available to view in its entirety at GwinnettCounty.com



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1. Affluent Healthcare 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:

N/A

Gwinnett County Elected Official Name

N/A

Gwinnett County Elected Official Name

N/A

Gwinnett County Elected Official Name

N/A

Gwinnett County Elected Official Name

4. BY: Keyondra Clark
Authorized Officer or Agent Signature

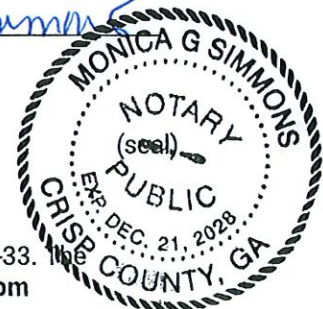
Keyondra Clark
Printed Name of Authorized Officer or Agent

Administrator
Title of Authorized Officer or Agent of Contractor

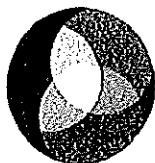
Sworn to and subscribed before me this

17th day of July, 2025

Monica G. Simmons
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



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1. Alliance Care of Atlanta, 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: [Signature]
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Kevin D. Castle
Printed Name of Authorized Officer or Agent

05 day of August, 2025

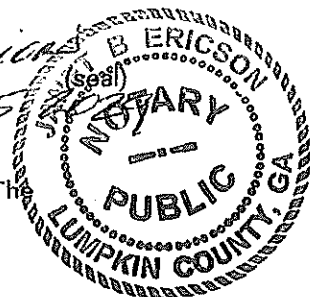
President
Title of Authorized Officer or Agent of Contractor

[Signature]
Notary Public

My commission expires: 09-05-2025

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

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





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1. At Home Atlanta, 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*)
Type text here
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

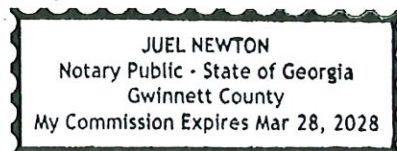
Sworn to and subscribed before me this

Darryl Ford
Printed Name of Authorized Officer or Agent

1 day of July, 2025

President
Title of Authorized Officer or Agent of Contractor

[Signature]
Notary Public



(seal)

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



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1. Ardent Care Home Health
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

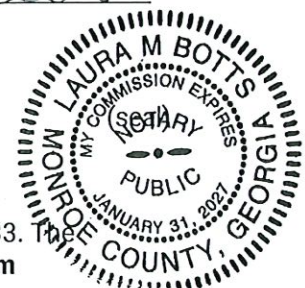
Sworn to and subscribed before me this

Britney Searcy
Printed Name of Authorized Officer or Agent

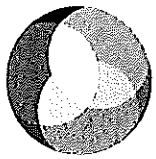
17 day of July, 2025

CEO
Title of Authorized Officer or Agent of Contractor

Laura M. Botts
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



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1. Cherokee Angel Senior Care
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

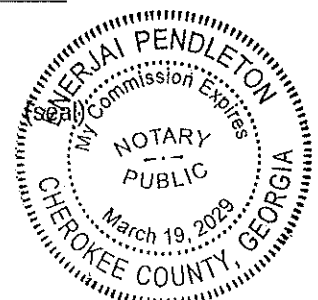
Dominique R Louis
Printed Name of Authorized Officer or Agent

17 day of July, 2025

Executive Director
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





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1. Healing Hands Private Care
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: ES Slack
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Georgian Slack
Printed Name of Authorized Officer or Agent

23rd day of July, 2025

Executive Director
Title of Authorized Officer or Agent of Contractor

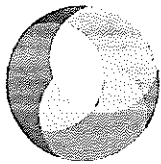
Charmaine J Gray
Notary Public

Charmaine J Gray
Notary Public, Dekalb County, GA
My Commission Expires July 07, 2027

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

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





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1. Heavenly Life Homecare 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: Anita Ocran
Authorized Officer or Agent Signature

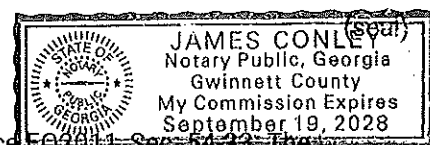
Sworn to and subscribed before me this

Anita Ocran
Printed Name of Authorized Officer or Agent

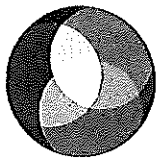
19th day of July, 2025

owner
Title of Authorized Officer or Agent of Contractor

Notary Public



Note: See Gwinnett County Code of Ethics Ordinance ~~EC2011-306-54-33~~ ~~the~~ ordinance will be available to view in its' entirety at **GwinnettCounty.com**



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DEPARTMENT OF FINANCIAL SERVICES
PURCHASING DIVISION

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- Lynette's TLC Home Services LLC
Company Submitting Bid/Proposal
- Please select one of the following:
☒ No information to disclose (complete only section 4 below)
☐ Disclosed information below (complete section 3 & section 4 below)
- 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: Aner McClure
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

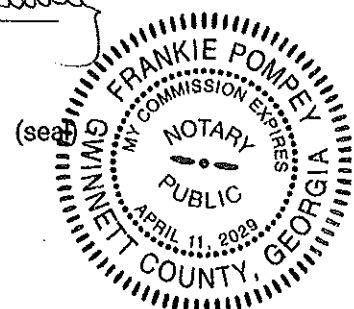
Aner McClure
Printed Name of Authorized Officer or Agent

14th day of July, 2025

Administrator
Title of Authorized Officer or Agent of Contractor

Frankie Pompey
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





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1. Mimi Cares Personal Care 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: Miyoshi Garrison
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Miyoshi Garrison
Printed Name of Authorized Officer or Agent

25th day of July, 2025

Owner
Title of Authorized Officer or Agent of Contractor

Shannon I. Alexander
Notary Public

Shannon I. Alexander
NOTARY PUBLIC (seal)
FULTON COUNTY, GEORGIA
My Commission Expires 11/06/2028

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



WINNETT COUNTY
DEPARTMENT OF FINANCIAL SERVICES
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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 bidder/proposer, its affiliates or its subcontractors:

1. My Healing Angels 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:

NA

Gwinnett County Elected Official Name

NA

Gwinnett County Elected Official Name

NA

Gwinnett County Elected Official Name

NA

Gwinnett County Elected Official Name

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

Nickia M Thomas
Printed Name of Authorized Officer or Agent

Administrator
Title of Authorized Officer or Agent of Contractor

Sworn to and subscribed before me this

16th day of July, 2025

Ken M August
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



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1. Prime Comfort Care 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: Brandi Wells-Evans
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Brandi Wells-Evans
Printed Name of Authorized Officer or Agent

22 day of July, 2025

Owner
Title of Authorized Officer or Agent of Contractor

Notary Public

JUSTIN EDGE
NOTARY PUBLIC
Henry County (seal)
State of Georgia
My Comm. Expires Aug. 29, 2026

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**



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1. Quality Care Inhome Care Service
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

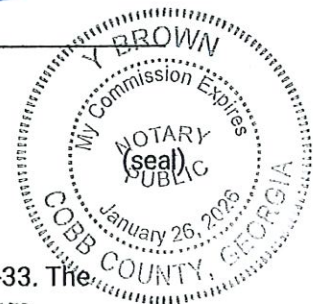
Gwinnett County Elected Official Name

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

Sworn to and subscribed before me this

Willie C. Frink
Printed Name of Authorized Officer or Agent
Ceo/Founder
Title of Authorized Officer or Agent of Contractor

16th day of July, 2025
[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**

ETHICS AFFIDAVIT



Gwinnett

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1. Southern Home Care Services, Inc. dba All Ways Caring HomeCare

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: Sherry Pemberton
Authorized Officer or Agent Signature

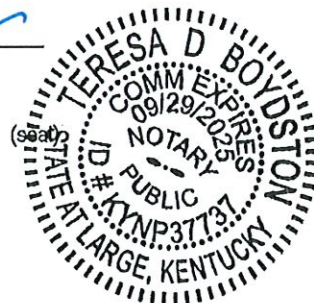
Sworn to and subscribed before me this

Sherry Pemberton
Printed Name of Authorized Officer or Agent
Vice President Payer Contracting
Title of Authorized Officer or Agent of Contractor

16th day of July, 2025
[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

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





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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 bidder/proposer, its affiliates or its subcontractors:

1. Tender Hands Private Home Care, 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: [Signature]
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Courtney Walker
Printed Name of Authorized Officer or Agent

22 day of July, 2025

Assistant
Title of Authorized Officer or Agent of Contractor

[Signature]
Notary Public
Karin Van Niekerk
NOTARY PUBLIC
Gwinnett County, GEORGIA
My Commission Expires 09/06/2026 (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**



Gwinnett

WINNETT COUNTY
DEPARTMENT OF FINANCIAL SERVICES
PURCHASING DIVISION

75 Langley Drive | Lawrenceville, GA 30046-6935
O: 770.822.8720 | F: 770.822.8735
GwinnettCounty.com

BL093-25, Provision of Respite & Personal Care Services for Gwinnett County Residents
on an Annual Contract

CODE OF ETHICS AFFIDAVIT

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1. Trusted Hands Senior Care, 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: Monique Collins
Authorized Officer or Agent Signature

Monique Collins

Printed Name of Authorized Officer or Agent
CEO

Title of Authorized Officer or Agent of Contractor.

Sworn to and subscribed before me this

17th day of July, 2025

Pamela D. Hall

Notary Public

Pamela D Hall
NOTARY PUBLIC

COBB COUNTY, GEORGIA

My Commission Expires 01/16/2029

(seal)

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