



BL003-20, Provision of Homemaker Services for Gwinnett County Citizens on an Annual Contract, Page 11

CODE OF ETHICS AFFIDAVIT

(THIS FORM SHOULD BE FULLY COMPLETED AND RETURNED WITH  
YOUR SUBMITTAL AND WILL BE 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 his/her 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:

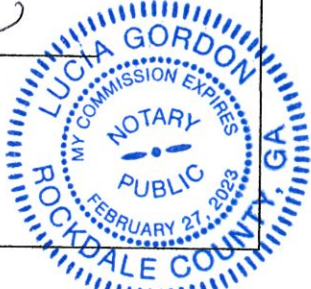
1. Angel Homecare Services, Inc  
(Company Submitting Bid/Proposal)

2. (Please check  one box below)  
 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. Sworn to and subscribed before me this  
BY: Cassandra Conton 14 day of Jan, 2020  
Authorized Officer or Agent Signature  
Cassandra Conton  
Printed Name of Authorized Officer or Agent  
CEO  
Title of Authorized Officer or Agent of Contractor  
Lucia Gordon  
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 [www.gwinnettcounty.com](http://www.gwinnettcounty.com)





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1. Dominion Partners Home Care of Atlanta, LLC, dba ComfortCare HomeCare  
(Company Submitting Bid/Proposal)

2. (Please check  one box below)  
 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. Sworn to and subscribed before me this  
BY: Michael D. Acker 16 day of January, 2020  
Authorized Officer or Agent Signature  
Michael D. Acker  
Printed Name of Authorized Officer or Agent  
Managing Partner  
Title of Authorized Officer or Agent of Contractor

Lisa C. Bowman  
Notary Public

LISA C BOWMAN  
Notary Public - State of Georgia  
Gwinnett County  
My Commission Expires Aug 27, 2021  
(Seal)

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



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7.14.17



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1. Georgia Community Support + Solutions, Inc, DBA InCommunity  
(Company Submitting Bid/Proposal)

2. (Please check  **one** box below)  
 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: Whitney A. Fuchs Sworn to and subscribed before me this  
Authorized Officer or Agent Signature 14 day of Jan 2020  
Whitney A. Fuchs Notary Public  
Printed Name of Authorized Officer or Agent  
CEO  
Title of Authorized Officer or Agent of Contractor

(seal)

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





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1. Nuhife Senior Care h/c  
 (Company Submitting Bid/Proposal)

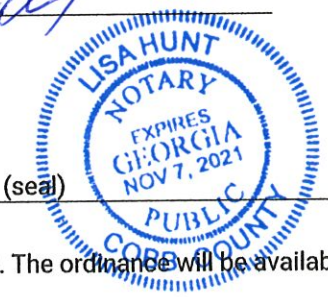
2. (Please check  one box below)  
 No information to disclose (complete only section 4 below)  
 Disclosed information below (complete section 3 & section 4 below)

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: Erica Clay Sworn to and subscribed before me this  
 Authorized Officer or Agent Signature 14 day of January, 2020  
Erica Clay Notary Public  
 Printed Name of Authorized Officer or Agent  
Owner  
 Title of Authorized Officer or Agent of Contractor

(seal)



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





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1. Options Homemaker Services, Inc.  
 (Company Submitting Bid/Proposal)

2. (Please check  one box below)

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. Sworn to and subscribed before me this

BY: Ruby Clemmons 14<sup>th</sup> day of January, 2020  
 Authorized Officer or Agent Signature

Ruby Clemmons Jennifer Williams  
 Printed Name of Authorized Officer or Agent Notary Public

Owner  
 Title of Authorized Officer or Agent of Contractor

DeKalb County, Georgia  
 My Commission Expires 8/22/2021  
 (seal)

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





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1. POWER WHEELCHAIR SERVICES INC DBA HEAVENLY COMPANION CARE  
(Company Submitting Bid/Proposal)

2. (Please check  one box below)  
 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. Sworn to and subscribed before me this  
BY: [Signature] 10<sup>th</sup> day of January, 2020  
Authorized Officer or Agent Signature  
OMOYE TRACY OROBAR  
Printed Name of Authorized Officer or Agent  
DIRECTOR  
Title of Authorized Officer or Agent of Contractor  
\_\_\_\_\_  
Notary Public  
**NEHA MATHUR**  
NOTARY PUBLIC  
Fayette County  
State of Georgia  
My Comm. Expires July 25, 2022  
(seal)

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





Gwinnett

ORIGINAL

WINNETT COUNTY DEPARTMENT OF FINANCIAL SERVICES PURCHASING DIVISION

75 Langley Drive | Lawrenceville, GA 30046-6935 (O) 770.822.8720 | (F) 770.822.8735 www.gwinnettcountry.com

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1. Southern Home Care Services, Inc. dba All Ways Caring HomeCare (Company Submitting Bid/Proposal)

2. (Please check one box below)

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.

Sworn to and subscribed before me this

BY: Sherry Pemberton Authorized Officer or Agent Signature

2nd day of January, 2020

Sherry Pemberton Printed Name of Authorized Officer or Agent

Lauren Mayer Notary Public

VP Contracts, Sales & Marketing Support Title of Authorized Officer or Agent of Contractor



Note: See Gwinnett County Code of Ethics Ordinance E02011, Sec. 54-33. The ordinance will be available to view in its' entirety at www.gwinnettcountry.com



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1. Trusted Hands Senior Care  
(Company Submitting Bid/Proposal)

2. (Please check  **one** box below)

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.

Sworn to and subscribed before me this

BY: Monique Collins  
Authorized Officer or Agent Signature

14 day of January, 2020

Monique Collins  
Printed Name of Authorized Officer or Agent

[Signature]  
Notary Public

CEO / Founder  
Title of Authorized Officer or Agent of Contractor



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

