



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:

Smyrna Police Distributors

2295 South Cobb Dr. Smyrna, GA 30080

1. (Company Submitting Bid/Proposal)

2. (Please check one box below)
[checked] 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 17 day of Feb
BY: Ronda Jacobs Authorized Officer or Agent Signature
Ronda Jacobs Printed Name of Authorized Officer or Agent
Contracts Manager Title of Authorized Officer or Agent of Contractor
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





BL016-20 Purchase of Supplemental Field Service Uniforms on an Annual Contract Page 18

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1. Golco Industrial Safety & Supply
(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. [Signature] Sworn to and subscribed before me this
BY: _____ 18 day of Feb, 2020
Authorized Officer or Agent Signature
Peake Colson Notary Public Joy B Wilson
Printed Name of Authorized Officer or Agent
President Title of Authorized Officer or Agent of Contractor

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





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1. Gotfredson Enterprises LLC d/b/a Embroidery EXPRESS, 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: [Signature] 13TH day of FEBRUARY, 2020
Authorized Officer or Agent Signature
LANCE GOTFREDSON
Printed Name of Authorized Officer or Agent
OWNER
Title of Authorized Officer or Agent of Contractor

[Signature]
Notary Public

JOHANNA M SIMMS
Notary Public - State of Georgia
Fulton County
My Commission Expires Feb 26, 2022
(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



