

DEPARTMENT OF FINANCIAL SERVICES PURCHASING DIVISION

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

BL139-23 Purchase of Nitrile Gloves on an Annual Contract

Page 7

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.	CLD dba Centerline Dynamics 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:	
P	REYTO RUIZ inted Name of Authorized Officer or Agent William R Many of November, 20_23	
T	Account Specialist tle of Authorized Officer or Agent of Contractor Notary Public William R Schar NOTARY PUB (sala)TE OF FLO	BLIC PRIDA
	Appt. No. HH 49 Expires October 1	
	Note: See Gwinnett County Code of Etnics Ordinance EO2p1 ரங்கள் கூடுக்கு கேக்கர் 1	,
	ordinance will be available to view in its' entirety at GwinnettCounty.com	

Notarial Act performed by Audio-Video Communication.



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 L GOSHEN PPE SUPPLIES, LLC Company Submitting Bid/Proposal 	
*	
 Please select one of the following: □ X No information to disclose (complete only information below (complete section 3 & s	
3. If additional space is required, please attach lis	st:
Gwinnett County Elected Official Name	Gwinnett County Elected Official Name
Gwinnett County Elected Official Name	Gwinnett County Elected Official Name
4. BY: Sligabeth & Mitchell	Commonwealth of Virginia, County of Prince William Sworn to and subscribed before me this
Authorized Officer or Agent Signature	Sworn to and subscribed before the this
ELIZABETH MITCHELL	07 day ofNOV, 20 <u>23</u>
Printed Name of Authorized Officer or Agent	Electronic Notary Public
	Notary Public
Title of Authorized Officer or Agent of Contractor	Azeen Azeem RECISITRATION NUMBER TORRES CONMISSION EXPRES April 30, 285
Notarized online using audio-video	communication

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.	Company Submitting Bid/Proposal Illimani Connec	ctions LLC.
2.	Please select one of the following: X No information to disclose (complete only section □ Disclosed information below (complete section □ Disclosed information	
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	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
_	Robert L Fryer rinted Name of Authorized Officer or Agent Manager itle of Authorized Officer or Agent of Contractor	Notary Public
	and of Marie 1200 of Moor of Mgork 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 **GwinnettCounty.com** NOTARY PUBLIC

Mecklenburg County, North Carolina
My Commission Expires 3/18/2026



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	Gwinnett County Elected Official Name	Gwinnett County Elected Official Name			
4.	BY:	Sworn to and subscribed before me this			
_	Robert L Fryer rinted Name of Authorized Officer or Agent Manager itle of Authorized Officer or Agent of Contractor	Jay of No Ven Box, 2023 Notary Pyblic			
		Control of the Contro			

TAYLOR SIMMONS
NOTARY PUBLIC
Mecklenburg County, North Carolina

Note: See Gwinnett County Code of Ethics Ordinance EO2011, Seci 54-93า Thesion Expires 8/31/26

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1.	Med Supply Partners		
	Company Submitting Bid/Proposal		
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4.	ву:	Sworn to and subscribed before me this	
	Authorized Officer or Agent Signature	(A //	
	PECKMorton		
Pr	inted Name of Authorized Officer or Agent	Soul W Hohal	
Ti	tle of Authorized Officer or Agent of Contractor	Notary Public	
		(seal)	

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