



GWINNETT COUNTY
DEPARTMENT OF FINANCIAL SERVICES
PURCHASING DIVISION

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

RP015-19 Provision of Probation Services for the State Court of Gwinnett County
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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. CSRA Probation 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.

BY:

[Signature]
Authorized Officer or Agent Signature

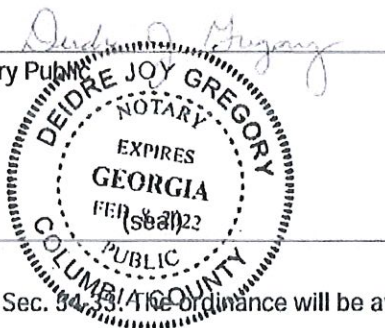
Ginny D. Kent
Printed Name of Authorized Officer or Agent

Director of Operations
Title of Authorized Officer or Agent of Contractor

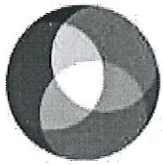
Sworn to and subscribed before me this

1st day of August, 2019

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 www.gwinnettcounty.com



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1. Professional Probation 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: <u>[Signature]</u>	<u>15</u> day of <u>August</u> , 20 <u>19</u>
Authorized Officer or Agent Signature	<u>[Signature]</u>
<u>John C. Cox "Clay"</u>	Notary Public
Printed Name of Authorized Officer or Agent	Kimberly W. Bannister
<u>President</u>	Notary Public
Title of Authorized Officer or Agent of Contractor	Gwinnett County, Georgia
	My Commission Expires
	September 12, 2020

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



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1. Southeast Corrections, LLC
(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:

John C. Prescott, Jr.
Authorized Officer or Agent Signature

John C. Prescott, Jr.

Printed Name of Authorized Officer or Agent

President

Title of Authorized Officer or Agent of Contractor

Sworn to and subscribed before me this

29 day of July, 2019

Shelly Kaczynski
Notary Public



Note: See Gwinnett County Code of Ethics Ordinance EO2011, Sec. 54-33. The ordinance is available to view in its' entirety at www.gwinnettcounty.com

7.14.17