

### 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. Everside Health 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 M Brenno  
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

Monique Brenno  
Printed Name of Authorized Officer or Agent

18th day of October, 2023

Vice President of Sales Operations  
Title of Authorized Officer or Agent of Contractor

[Signature]  
Notary Public

(seal)

MARTIN CASILLAS GUTIERREZ  
NOTARY PUBLIC  
STATE OF COLORADO  
NOTARY ID 20234004589  
MY COMMISSION EXPIRES 02/03/2027

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](http://GwinnettCounty.com)