



This form is to assist state officers and employees in determining conflicts between public duties and private economic interests as defined by Ethics Commission Rule 4 and may be completed by the signature authority to renew or amend. Maintain this form in the contract file.

GENERAL INFORMATION

Solicitation number

Company, parent or subsidiary involved in the contract

List of bidders for evaluation

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.
11.	12.

SIGNATURE AUTHORITY

I, the undersigned, hereby certify to the best of my knowledge and belief the following:

1. Neither I nor my immediate family possesses any financial interest in the company, parent or subsidiary, which has submitted a proposal or bid in response to the above-referenced solicitation being considered by the evaluation team.
2. I have not received or been promised any personal benefit for myself or my immediate family by the company or individual responding to the above-referenced solicitation.
3. I acknowledge my contacts, any friendships, family or social relationships, past, present or planned employment relationships, or other accommodations offered or received by myself from an individual associated with the company, parent or subsidiary submitting a proposal or bid in this matter, might be perceived as a conflict of interest in my signatory role.
4. I understand that if a conflict exists, it would be a violation of the Oklahoma Ethics rules.

I, the undersigned, agree to the following:

5. Failure to abide by the terms of this statement may subject me to adverse actions as authorized by law.
6. If I cannot at any time certify to the statements or feel a conflict of interest exists, I shall seek written guidance from my agency counsel or the Ethics Commission to determine how to proceed within the ethics rules in the best interest of the agency and State of Oklahoma.

Name

Title

Signature authority

Date