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State of New Jersey Division of Purchase and Property Two-Year Chapter 51 / Executive Order 117 Vendor Certification and Disclosure of Political Contributions

| Gene | eral Informatio | on | For AGEN | CY USE C | ONLY | | |
|------------------------------------|--|--|---|---|--------------------------------------|-------------------------------------|--|
| Solici | itation, RFP or C | contract No. | | Award | Amount | | |
| | ription of Service | | | | | | |
| Ager | ncy Contact In | formation | | | | | |
| Agen | - | | | Contac | t Person | | |
| | e Number | | | | | | |
| | | | | Agenc | y Email | | |
| Part 1: | Vendor Info | rmation | | | | | |
| Full L | egal Business N | lame | | | | | |
| | | (Including trade | name if applicable) | | | | |
| Busi | ness Type | Corporation | Limited Partn | ership | Professiona | Corporation | General Partnership |
| | | Limited Liability Co | ompany | Sole Prop | prietorship | | ed Liability Partnership |
| Addre | ess 1 | | | Addres | | | |
| City | | | State | | Zip | Ph | one |
| Vendo | or Email | | | Vendor | FEIN | | |
| a) | contract to the Within the pre (i) Any can or <i>Lieut</i> | d contributions, comp vendor, pursuant to th ceding 18 months, th didate committee and enant Governor; | ne terms of Executiv ne below-named pe /or election fund of | ve Order 117 rson or orga any candida | ′ (2008). nization has not | made a contri | bution to: |
| | (iii) Any legi | te, county, <i>municipal</i> islative leadership co | ommittee. | | | | |
| b) | b) During the term of office of the current Governor(s), the below-named person or organization has not made a contribution to | | | | | | |
| | (ii) Any Stat | didate, committee and te, county or municip a mencement of said Go | al political party cor | | | | |
| c) | c) Within the 18 months immediately prior to the first day of the term of office of the Governor(s), the below-named person or organization has not made a contribution to | | | | | | |
| | Any State | didate, committee and e, county, <i>municipal</i> p e(s) in the last guberna | political party comm | | | | २ uccessful gubernatorial |
| or contr that is a within th | olling more than corporation for | 10 percent of the prof profit) to any candidate nonths, during the terr | its or assets of a bu | usiness entity election fun | y (or 10 percent d of the Governo | of the stock in or or to any sta | the vendor or a principal owning the case of a business entity ate or county political party mediately prior to the first day o |

| Check this box if no reportable contribution or individual. | Address of Recipient | ove-named business entity |
|---|------------------------|---------------------------|
| Date of Contribution | Amount of Contribution | |
| Type of Contribution (i.e. currency, check, loan, in- | kind | |
| Contributor Name | | |
| Relationship of Contributor to the Vendor | | |
| Contributor Address | | |
| City | State | Zip |

If this form is not being completed electronically, please attach pages for additional contributions as necessary. Otherwise click "Add a Contribution" to enter additional contributions.

Part 4: Certification

I have read the instructions accompanying this form prior to completing this certification on behalf of the above-named business entity. I certify that, to the best of my knowledge and belief, the foregoing statements by me are true. I am aware that if any of the statements are willfully false, I am subject to punishment.

I understand that this certification will be in effect for two (2) years from the date of approval, provided the ownership status does not change and/or additional contributions are not made. If there are any changes in the ownership of the entity or additional contributions are made, a new full set of documents are required to be completed and submitted. By submitting this Certification and Disclosure, the person or entity named herein acknowledges this continuing reporting responsibility and certifies that it will adhere to it.

(CHECK ONE BOX A, B or C)

(A) I am certifying on behalf of the above-named business entity and all individuals and/or entities whose contributions are attributable to the entity pursuant to Executive Order 117 (2008).

(B) \square I am certifying on behalf of the above-named business entity only.

(C) I am certifying on behalf of an individual and/or entity whose contributions are attributable to the vendor.

| Signed Name | Print Name |
|----------------|------------|
| Phone Number | Date |
| Title/Position | |

Agency Submission of Forms

The agency should submit the completed and signed Two-Year Vendor Certification and Disclosure forms, together with a completed Ownership Disclosure form, either electronically to cd134@treas.state.nj.us, or regular mail at Chapter 51 Review Unit, P.O. Box 039, 33 West State Street, 9th Floor, Trenton, NJ 08625. The agency should save the forms locally and keep the original forms on file, and submit copies to the Chapter 51 Review Unit.