



**Bid # & Description BL070-24, Purchase Only and Purchase & Installation of Sod on an Annual Contract**

### 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. KIRKPATRICK'S TURF + LANDSCAPE MAINT  
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: [Signature]  
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

A KIRKPATRICK  
Printed Name of Authorized Officer or Agent

30<sup>th</sup> day of MAY, 2024

Admin  
Title of Authorized Officer or Agent of Contractor

[Signature]  
Notary Public



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](http://GwinnettCounty.com)



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1. VISIONSCAPES, INC  
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)

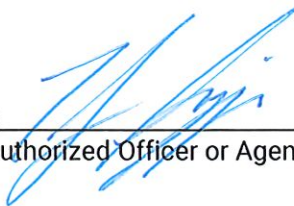
3. If additional space is required, please attach list:

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

\_\_\_\_\_  
Gwinnett County Elected Official Name

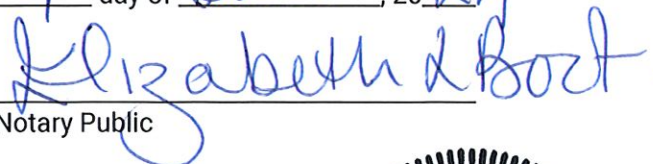
4. BY:   
Authorized Officer or Agent Signature

Sworn to and subscribed before me this

T.J. SCOGGINS  
Printed Name of Authorized Officer or Agent

4 day of June, 2024

V.P. of Maintenance  
Title of Authorized Officer or Agent of Contractor

  
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 [GwinnettCounty.com](http://GwinnettCounty.com)

