OSURE STATEMENT	30,000 shall submit this gulated by the illinois gerial positions of the child, stepchild, parent, tives and non-relatives currty board chair, or , county board chair, or	owners, principals, or ttach additional pages hip	ually. Attach additional Date Made N.O.B.C.	t form is available at <u>lakecountvil gov</u> . authorized signer on that I agree to update	osure Statement. ドレントリセット スーノアー えのみの rative for exception.	10.8.2019
BID CLOSURE ST Utrue Des Plan. 11	an amount greater than \$ 1 for utility companies ru loe: pertment director, deput ser or other similar mana (including civil partner), util an sibiling, or child), rela rutioned person. an owner, principal, exec ny county board member priate space.	นblic officials with whom ow ture of the relationship. Atta leave blank.) Familial Relationship // o N c // oภา-c	Is that exceed \$150 anni Do not leave blonk.) Amount/Value \mathcal{VU} b 4.c. \mathcal{VU} b 4.c.	or Disclosure Statemen ces are available at <u>www</u> complete, that I am an ure requirements, and t	w Vendor Disclosure S Title: $P \lor \varsigma$; Date: $3 \to j$ rovide a brief narrative fi	Q
RETURN WITH BID VENDOR DISCLOSURE STATEMENT Pricipi Parcent Phylophene 255 Sees R. Docs Phone #: 21/ 6016 Contact Phone #: 247-3/3-9034	 Anony awaing to contract with lake County for goods and services in an anount greater than 530,000 shall submit this form in advance of award. This disclosure statement is not required for utility companies regulated by the Illinois Commerce Commission or local units of government. Verdors shall disclose: A familiar feationship between a lake County elected official, department director, deputy director and manager and owners, principals, executives, officer, account managers or other similar managerial positions of the vendor's company. Fainliar relationship is defined as a spouse (including civil partent), child, stepchild, parent, stepparent, grandparent, in-laws (including parent, grandparent, sinking in the arm residence, and offspring born to any aforementioned person. All political campaign contributions made by the vendor or an owner, principal, executive, officer, account managers to child, relatives, and non-relatives. All political campaign contributions made by the vendor or an owner, principal, executive, officer, account managers to county board member, county board chair, or countywide elected official within the last five years. 	FAMILIAL RELATIONSHIPS Ust normes and departments/agencies of take County employees or public officials with whom owners, principals, or officers of the vendor's company have a familial relationship and the nature of the relationship. Attach additional pages as necessary. (Provide all names or state none in the space below. Do not leave blank.) Name and Department/Agency of Lake County Familial Relationship. Attach additional pages as necessary. (Provide all names or state none in the space below. Do not leave blank.) Name and Department/Agency of Lake County Familial Relationship Employee Upblic Official $W O W C$ $V O W C$ $V O M C$	CAMPAIGN CONTRIBUTIONS List comparison contributions that have been made within the last five years that exceed \$150 annually. Attach additional pages as necessary. (Provide all names or state not in the spore below. Do not leave blank.) Beschiption (e.g. as and evene. Description (e.g. as and evene. Provent. Provent. Provent. Provent. Provent. Provent. Provent. Provent. Prove. Prove. Prove. Prove. Prove.	Continuing disclosure is required if information changes. This Vendor Disclosure Statement form is available at <u>www.lakecountvil.gov</u> . The full text of the County's Ethics and Procurement policies and ordinances are available at <u>www.lakecountvil.gov</u> . I hereby acknowledge that the information above is accurate and complete, that I am an authorized signer on behalf of the vendor, that I have read and understand these disclosure requirements, and that I agree to update	this information if there are any related changes by submitting a new Vendor Disclosure Statement. Authorized Signature: $\sqrt{\lambda_4 \lambda_4} + \frac{\lambda_6 \lambda_6}{2} \sqrt{\lambda_6} - \frac{1}{2} \sqrt{\lambda_6} + \frac{1}{2} \sqrt{\lambda_6} \sqrt{\lambda_6} + \frac{1}{2} \sqrt{\lambda_6} \lambda_$	RETURN WITH BID
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LakeCounty Vendor Name: Address: Contact Person: Bid/RFP/SOI/Contract/Renewal: Mondors with the ten	there is a contract of the second sec	FAMILIAL RELATIONSHIPS Ust nomes and department. officers of the vendor's comp ss necessary. (Provide all nar Name and Departmen Famployed.	CAMPAIGN CONTRIBUTIONS List campaign contributions that ages as necessary. (Provide all Receptions M. o.M.C. M. o.M.C.	Continuing disclosure is www.lakecounty/il.gov. The full text of the County I hereby acknowledge t	inis information if there Authorized Signature: Printed Name: endors must insert "x" i	
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