

State of Alabama Disclosure Statement

(Required by Act 2001-955)

ENTITY COMPLETING FORM	
RJ Young ADDRESS	
211 Frankfurt Circle Birmingham, AL 35211	(205) 453-4327
CITY, STATE, ZIP	TELEPHONE NUMBER
Alabama Community College System (ACCS)	
STATE AGENCY/DEPARTMENT THAT WILL RECEIVE GOODS, SERVICES, OR IS R	RESPONSIBLE FOR GRANT AWARD
135 South Union Street	
ADDRESS	
Montgomery, AL 36104	(334) 293-4500
CITY, STATE, ZIP	TELEPHONE NUMBER
This form is provided with:	
☐ Contract ☐ Proposal ☑ Request for Pr	roposal Invitation to Bid Grant Proposal
Agency/Department in the current or last fiscal year? Yes No	ed business units previously performed work or provided goods to any State acceived the goods or services, the type(s) of goods or services previously pro- goods or services.
STATE AGENCY/DEPARTMENT TV	YPE OF GOODS/SERVICES AMOUNT RECEIVED
Have you or any of your partners, divisions, or any related Agency/Department in the current or last fiscal year? Yes No	ed business units previously applied and received any grants from any State
	d the grant, the date such grant was awarded, and the amount of the grant.
STATE AGENCY/DEPARTMENT	DATE GRANT AWARDED AMOUNT OF GRANT
ground the same of	
any of your employees have a family relationship and	fficials/public employees with whom you, members of your immediate family, or who may directly personally benefit financially from the proposed transaction. blic officials/public employees work. (Attach additional sheets if necessary.)
NAME OF PUBLIC OFFICIAL/EMPLOYEE	ADDRESS STATE DEPARTMENT/AGENCY
n/a	
IVG	
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OVER



2.	List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your
	immediate family, or any of your employees have a family relationship and who may directly personally benefit financially from the
	proposed transaction. Identify the public officials/public employees and State Department/Agency for which the public officials/public
	employees work. (Attach additional sheets if necessary.)

but identified individuals in items one and/or two above, describe in detail below the direct financial benefit to be gained by the putials, public employees, and/or their family members as the result of the contract, proposal, request for proposal, invitation to bid it proposal. (Attach additional sheets if necessary.) Secribe in detail below any indirect financial benefits to be gained by any public official, public employee, and/or family members of the official or public employee as the result of the contract, proposal, request for proposal, invitation to bid, or grant proposal. (At litional sheets if necessary.) I below the name(s) and address(es) of all paid consultants and/or lobbyiets utilized to obtain the contract, proposal, request for all, invitation to bid, or grant proposal. I below the name(s) and address(es) of all paid consultants and/or lobbyiets utilized to obtain the contract, proposal, request for all, invitation to bid, or grant proposal. I below the name(s) and address(es) of all paid consultants and/or lobbyiets utilized to obtain the contract, proposal, request for all, invitation to bid, or grant proposal. ADDRESS: Signing below, I certify under oath and penalty of perjury that all statements on or attached to this form are true and contracts of my knowledge. I further understand that a civil penalty of ten percent (10%) of the amount of the transgation exceed \$10,000.00, is applied for knowingly providing incorrect or misleading information. ADDRESS: OZ. 13.19 OZ. 13.19 OZ. 13.19	NAME OF FAMILY MEMBER	ADDRESS	NAME P	PUBLIC EMPLOYEE	AGENCY WHERE EMPLOYED
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	ignature		*Date*		PUBLICULAR COUNTY
tary's Signature Date Date Notary Expires	al The	2		F0.P0	.2] Commission Espires
/) //	lotary's Signature		Date		Date Notary Expires

Article 3B of Title 41, Code of Alabama 1975 requires the disclosure statement to be completed and filed with all proposals, bids, contracts, or grant proposals to the State of Alabama in excess of \$5,000.

