

State of Alabama

Disclosure Statement

Required by Article 3B of Title 41, Code of Alabama 1975

benefit financially from the proposed transaction s work. (Attach additional sheets if necessary.) STATE DEPARTMENT/AGENCY
whom you, members of your immediate family, or
AMOUNT OF GRANT
ant was awarded, and the amount of the grant.
applied and received any grants from any State
AMOUNT RECEIVED
s, the type(s) of goods or services previously pro-
*
performed work or provided goods to any State
Bid Grant Proposal
334-242-7250
TELEPHONE NUMBER
662-323-9484
TELEPHONE NUMBER

immediate family, or any of yo proposed transaction. Identify employees work. (Attach addit	the public officials/public en	ly relationship and who may directly mployees and State Department/Ago	/ personally benefit ency for which the p	financially from the public officials/public
NAME OF FAMILY MEMBER	ADDRESS	NAME OF PUBLIC OF PUBLIC EMPLOYI		ATE DEPARTMENT/ CY WHERE EMPLOYED
None				
If you identified individuals in iter officials, public employees, and/o grant proposal. (Attach additional	or their family members as	describe in detail below the direct fin the result of the contract, proposal,	ancial benefit to be request for proposa	gained by the public I, invitation to bid, or
Not Applicable				
Describe in detail below any indipublic official or public employee additional sheets if necessary.)	rect financial benefits to be as the result of the contra	gained by any public official, public ct, proposal, request for proposal, in	employee, and/or fa vitation to bid, or gr	mily members of the ant proposal. (Attach
Not Applicable				-
List below the name(s) and add posal, invitation to bid, or grant		ants and/or lobbyists utilized to obtain	n the contract, prop	osal, request for pro-
NAME OF PAID CONSULTANT/LOBB		ADDRESS		
None	<u> </u>			
			· 	
By signing below, I certify uni	der oath and penalty of De	erjury that all statements on or atta	ached to this form	are žinie and correct
to the best of my knowledge.	I further understand that	a civil penalty of ten percent (10%) of the amount of	
to exceed \$10,000,00, is application	ea for knowingly providing	g incorrect or misleading informa	:w:	ID # 55923
				IIFER GABLE KIMBROUGH
Signature		01 - 30 - 201 Date	9	Commission Expires
Demit &	she Kimbrus	N 1-30-2019	Anx	1 29 2019
Notary's Signature	114 1000 1	Date	Dale	Notary Expires

2. List below the name(s) and address(es) of all family members of public officials/public employees with whom you, members of your

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.