FORM B
CONFLICT OF INTEREST AFFIDAVIT

STATE OF _____________________________) SS.:  

__________________________, being duly sworn, deposes and says: He is an officer of ________________________________, which is about to render services to the Authority as a contractor/consultant or in any other professional capacity (the “Firm”) and agrees that the Firm has no interest and will not acquire any interest, direct or indirect, that would conflict in any manner or decree with the performance of its services to be rendered to the Authority.

That it is further agreed in the rendering of services to the Authority, no person having any such interest shall knowingly be employed by the undersigned or the Firm.

Respondent’s Name: ____________________________

Signature: ____________________________  Authorized Official

Typed or Printed Name: ____________________________

Title: ____________________________

Date: ____________________________

Sworn to before me this ______

day of _____________, 2010.

_____________________________________

NOTARY PUBLIC

_____________________________________

Form B