



MIAMI-DADE COUNTY
DISCLOSURE AFFIDAVIT

I, _____ being first dully sworn state:

The full legal name and business address of the person or entity contracting or transacting business with Miami-Dade County are:

If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stock holder who holds directly or indirectly five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full legal name and address shall be provided for each trustee and each beneficiary. All such name and addresses are:

The full legal name and business of any other individual (other than subcontractor, material men, suppliers, laborers, ore lenders) who have; or will have, any interest (legal, equitable, beneficial or otherwise) in the contract or business transaction with Miami-Dade County are:

Post Office Box Addresses Not Acceptable
(Use separate pages if necessary.)

By _____
Signature of Affiant Date

SUBSCRIBED AND SWORN TO (or affirmed) before me this _____

By _____ he/she is personally known to me or has presented _____ as identification.

(Type of Identification)

(Signature of Notary) (Serial Number)

(Print or Stamp Name of Notary) (Expiration Date)

Notary Public _____ Notary Seal
(State)

