West Virginia Ethics Commission Disclosure of Interested Parties to Contracts 2018

(Required by W. Va. Code § 6D-1-2)

VV Ethics Commission

Contracting Business Entity: Aviat U.S., Inc.	Address:	860 N. M	cearthy Blud ste 200
		Milpitas,	CA 95035
Authorized Agent: PA DAVIS	Address:		
Contract Number: HSE 1419 C	ontract Descrip	otion: Technic	al-Maintenance
Governmental agency awarding contract: WV DHSE		gves n	V Lostellation Truepoint
.a.		Ectips	e 845.
Check here if this is a Supplemental Disclosure			
List the Names of Interested Parties to the contract which are lentity for each category below (attach additional pages if nec		ably anticipated b	y the contracting business
Subcontractors or other entities performing work or s	service under th	ne Contract	
☑Check here if none, otherwise list entity/individual nam	es below.		
2. Any person or entity who owns 25% or more of contraction of the con		ot applicable to	publicly traded entities)
3. Any person or entity that facilitated, or negotiated services related to the negotiation or drafting of the a Micheck here if none, otherwise list entity/individual name. Signature: MM Muuu	applicable contr les below.		, , ,
Notary Verification			
State of, Cou	nty of		
	the a	uthorized agent o	of the contracting business
entity listed above, being duly sworn, acknowledge that the penalty of perjury.	Disclosure herei	n is being made	under oath and under the
Taken, sworn to and subscribed before me this	day of		* jej-m-materialenistenistenistenistenistenistenistenist
·			
and a contract of the contract	Notary Pul	blic's Signature	SEE ATTALLIED
To be completed by State Agency: Date Received by State Agency: Date submitted to Ethics Commission; 201 8 201	B		SEE ATTACKED CX JURAT
	rchasing		
CCT HSE 18*03 PF 432602	V		Revised October 7, 2017

CALIFORNIA JURAT WITH AFFIANT STATEMENT GOVERNMENT CODE § 8202 See Attached Document (Notary to cross out lines 1-6 below) See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary) Signature of Document Signer No. 1 Signature of Document Signer No. 2 (if any) A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. State of California Subscribed and sworn to (or affirmed) before me County of SANTA 20 18. by (and (2) Name(s) of Signer(s) proved to me on the basis of satisfactory evidence HOLLY A. ARCHER Notary Public - California to be the person(s) who appeared before me. Santa Clara County Commission # 2213003 My Comm. Expires Oct 2, 2021 Seal Place Notary Seal Above **OPTIONAL** Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document. **Description of Attached Document** Title or Type of Document: DISCUS (Nh. Parkes - WV Document Date: SIN 18 Signer(s) Other Than Named Above: _ @2014 National Notary Association • www.NationalNotary.org • 1-800-US NOTARY (1-800-876-6827) Item #5910