

Received

NOV 02 2021

West Virginia Ethics Commission

Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

WV Ethics Commission

Name of Contracting Business Entity: AMG Healthcare Address: 1914 NW 84th Ave

Doral, FL 33126

Name of Authorized Agent: Barry Hill Address: 1914 NW 84th Ave Doral, FL 33126

Contract Number: CMA DBS 22★03 Contract Description: _____

Governmental agency awarding contract: _____

Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

1. Subcontractors or other entities performing work or service under the Contract

Check here if none, otherwise list entity/individual names below.

2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)

Check here if none, otherwise list entity/individual names below.

Barry Hill

3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

Check here if none, otherwise list entity/individual names below.

Barry Hill

Signature: [Signature]

Date Signed: October 13, 2021

Notary Verification

State of Florida, County of Palm Beach:

I, Barry Hill, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

Taken, sworn to and subscribed before me this 13th day of October, 2021

[Signature]
Notary Public's Signature

To be completed by State Agency:

Date Received by State Agency: 10-13-2021

Date submitted to Ethics Commission: OCT 26 2021

Governmental agency submitting Disclosure: Purchasing

CMA DBS 22★03
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