

RECEIVED

By Ethics Commission at 3:28 pm, Oct 25, 2022

West Virginia Ethics Commission
Disclosure of Interest

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: Rock Forge Bridge Co., LLC

Address: PO Box 60, Amma, WV 25005

Name of Authorized Agent: Chad D. Tingler Address: PO Box 60, Amma, WV 25005

Contract Number: 1732401 Contract Description: Laurel Bridge

Governmental agency awarding contract: West Virginia Department of Transportation, Division of Highways

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.
Highway Safety, Inc., Martin Reinforcing, P&G Construction Co., PDK Construction, Inc., Southern Traffic Colutions, LLC, DLT Contracting, West Virginia Paving, Inc., Oglesby Construction, Inc., Donley Concrete Cutting & Drilling Co. Southern West Virginia Paving, Inc.

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.
Gulf Stream West Investments, Inc.

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.

Signature:  Date Signed: October 10, 2022

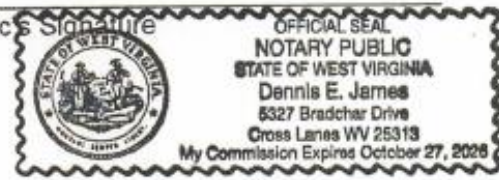
Notary Verification

State of West Virginia, County of Roane:

I, Chad D. Tingler, 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 10 day of October, 2022.


Notary Public's Signature



To be completed by State Agency:

Date Received by state agency: _____
Date submitted to Ethics Commission: _____
Governmental agency submitting Disclosure: _____