New Mexico General Services Department State Purchasing Division

AGENCY CERTIFICATION FORM

		hereby certifies the following in reg	ard to the attached
contra	ctual		
	Agency Name		
agreen	nent between the Agency and		_:
		Name of Contractor	
1)	This contractor <u>IS/IS NOT</u> a form	er state employee. (See note below)	
2)	This contractor <u>IS/IS NOT</u> a curr current	ent state employee or a legislator or	the family member of a
	(circle one)		
	state employee or legislator, or a b	usiness in which a current state empl	loyee or legislator or
	family member of the current state	employee or legislator has an interest	st of greater than 20%.
	(See note below)		-
fro con em awa	m State of New Mexico and an AG's letter if ntract. No contract may be awarded to a curr ployee or legislator, or to a business in which arded pursuant to the Procurement Code, ex	Employee Affidavit (found on CRB website), F contractor separated/retired within the last fiv ent state employee or legislator, or to a family any of these persons has an interest greater th cept such persons or businesses cannot be away hrough 10-16-18 NMSA 1978 for further inform	e years to the date of signed member of a current state an 20% unless such contract is rded a contract through a sole
3)	This Contractor is a (check one):	FOR PROFIT VENDOR NOT FOR PROFIT VENDOR	
4)	This PSA DOES COMPLY with the an	Governor's Guidelines for Contract Revi	ew and Re-Evaluation and IS

essential contract for the Agency.

Signature of Agency Representative**

Date

I certify that the information stated in paragraphs 1-3 is true.

Signature of Contractor

Date

**Must be a DFA authorized signature