

EXHIBIT B

WASHOE COUNTY SCHOOL DISTRICT PUBLIC DISCLOSURE FORM

VENDOR/CONTRACTOR

THIS IS A REQUIRED FORM TO BE COMPLETED, SIGNED, AND SUBMITTED BY THE VENDOR/CONTRACTOR

VENDOR/CONTRACTOR (EMPLOYEE) FIRST/LAST NAME: _____

VENDOR/CONTRACTOR NAME: _____

I understand that per NRS 281A.020, a public office is a public trust and shall be held for the sole benefit of the people, and a public officer or employee must commit themselves to avoid conflicts between the private interests of the public officer or employee and those of the general public whom the public officer or employee serves.

Furthermore, I understand that pursuant to Washoe County School District (WCSD) Board of Trustees Policy 4505 and per NRS 281A.400, WCSD employees (as public officers) shall not seek and/or accept any gift, work/service, favor, employment, engagement, emolument, and/or economic opportunity, including, but not limited to, unlawful compensation, salary, retainer, augmentation, expense allowance, commission, personal profit, pecuniary interest in the course of performing WCSD duties. In addition, WCSD employees (as public officers) shall not use their positions to secure and/or grant unwarranted privileges, preferences, exemptions, and/or advantages for the public officer or employee with any business entity.

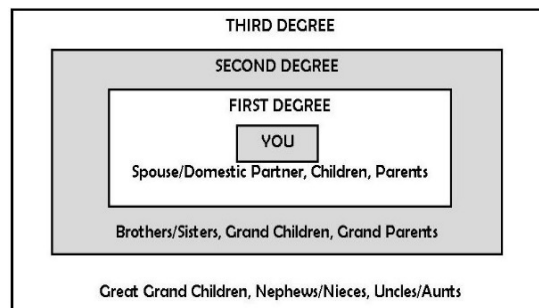
By signing this form, I certify and acknowledge that I am a duly authorized agent of the VENDOR/CONTRACTOR named above and that failure to disclose all facts relative to a conflict and/or potential conflict of interest (ethical standards) with regard to the specific solicitation, project, and/or contract to which the VENDOR/CONTRACTOR named above is submitting to WCSD may result in a rejection of said solicitation, project, and/or submission and/or termination of any resulting contract should the above-named VENDOR/CONTRACTOR be selected and/or awarded. Furthermore, I also certify that I have completed the following and have provided true and accurate information to the best of my knowledge:

- A. I certify that, to the best of my knowledge, **NO** current or former WCSD employees, officers, or trustees have a private pecuniary interest in the VENDOR/CONTRACTOR. ☐ **AGREE** ☐ **DISAGREE**

If you **DISAGREE** and cannot certify, then please explain:

- B. To the third degree of consanguinity (refer to the chart below), I have listed all of my and the principal(s) and key personnel of my organization's personal relationships, partnerships, correlations, and relatives (by blood and/or marriage) between WCSD, Officers of WCSD, key employees of WCSD, current and former WCSD Board of Trustees members and any other current and former WCSD personnel. ☐ **AGREE** ☐ **DISAGREE**

If you **DISAGREE** and cannot certify, then please explain:



SIGNATURE: _____

DATE: _____