

DEPARTMENT OF FINANCE AND ADMINISTRATION

AGENCY CERTIFICATION

_____ (INSERT AGENCY NAME) hereby certifies the following in regard to the attached contractual agreement between the Agency and

_____ (NAME OF CONTRACTOR):

- 1) This Contractor is NOT a **former state employee**.*
- 2) This Contractor is NOT a **current state employee** or a **legislator** or the **family member** of a current state employee or legislator, or a **business** in which a current state employee or legislator or family member of the current state employee or legislator has an interest of greater than 20%.*

PLEASE NOTE: No contract may be awarded to a current state employee or legislator, or to a family member of a current state employee or legislator, or to a business in which any of these persons has an interest greater than 20% unless such contract is awarded pursuant to the Procurement Code, except such persons or businesses cannot be awarded a contract through a sole source or small purchase. (See Section 10-16-1 through 10-16-18 NMSA 1978 for further information.)

- 3) This Contractor is a (check one):
FOR PROFIT VENDOR _____
NOT FOR PROFIT VENDOR _____

- 4) This PSA DOES COMPLY with the Governor's Guidelines for Contract Review and Re-Evaluation and IS an 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

*If the Contractor is covered by one of these categories, please contact your CRB Analyst for the required procedures for processing.

**Must be an authorized signatory for the Agency.