Designation Statement

I, ______________________________________________, do hereby affirm that I am: (check one of the options below)

☐ African-American (a person having origins in any of the black racial groups of the African Diaspora, regardless of cultural origin)
☐ Asian-American (a person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands, including the Hawaiian Islands prior to 1778)
☐ Hispanic-American (a person of Spanish or Portuguese culture with origins in Spain, Portugal, Mexico, South America, Central America, or the Caribbean, regardless of race)
☐ Native American (a person who has origins in any of the Indian Tribes of North America before 1835)
☐ American Woman

*All information and documents submitted as part of the Certified Business Enterprise Process or Statement for Recertification become an official public record. As such, the certifying entity bears no obligation to return to the business any items of original production or any copies of file documents. Pursuant to section 287.094(1), Florida Statutes:

It is unlawful for any individual to falsely claim to be a minority business enterprise for purposes of qualifying for certification with any governmental certifying organization as a minority business enterprise in order to participate under a program of a state agency which is designed to assist certified minority business enterprises in the receipt of contracts with the agency for the provision of goods or services. The certification of any contractor, firm, or individual obtained by such false representation shall be permanently revoked, and the entity shall be barred from doing business with state government for a period of 36 months. Any person who violates this section is guilty of a felony of the second degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084.

Further, the undersigned declares, subject to criminal prosecution for perjury pursuant to section 837.06, Florida Statutes, that this Statement of Ethnic Designation is true, and information provided in the submission is accurate.

________________________________________________________________________________________

Full Name (please print)

________________________________________________________________________________________

Signature

________________________________________________________________________________________

Title

________________________________________________________________________________________

Company Name

On this __________ day of _______________, ________, personally appeared before me, the undersigned officer authorized to administer oaths, known to me the persons described in the foregoing statement who acknowledged that he/she execute the same in the capacity stated for the purpose therein contained. In witness whereof, I have hereunto set my hand and official seal.

________________________________________________________________________________________

Notary Public          Form of Identification Presented

My Commission expires __________________________________________________________________________