Contractors, Vendors, & Other Business Relations

1. Contractors & Vendors - List all contractors and vendors anticipated to be used on this project			
Company Name	**Principal Contact**	**Address**	**Nature of Relationship**

2. **Agency Specific Relations** – Please list any Board Members, Employees (includes agents, consultants, & volunteers) or their relatives* that are paid by your agency for products or services, other than normal payroll	
Name of Affected person (i.e. board member or employee)	**Product or Service**

3. **Other Employers (Board)** – If any employer of a Board Member or a Board Member's relative* is being paid for a product or service, please list those here.	
Name of Affected Board Member	**Employer's Name and Product or Service**

4. **Other Employers (Employees)** – If any other employer of an Employee or an Employee's relative* is being paid for a product or service, please list those here.	
Name of Affected Employee	**Employer's Name and Product or Service**

5. **Other Entities/Organizations** – Please list all other entities/organizations that your agency is affiliated. This includes partnerships, subsidiaries, parent organizations, etc.	
Name of Entity/Organization	**Describe the Nature of the Relationship**

*** Relative (definition)** - The spouse, parent, child, brother, sister, grandparent, grandchild, including steps, and in-laws; and any person cohabitating with a covered person, as well as any immediate family member related by blood, marriage, or adoption, but not distant relations such as cousins, aunts, uncles, or who do not reside with the covered person.

WARNING: It is unlawful to provide false information to the government when applying for federal public benefit programs per Section 1001 of Title 18 of the United States Code.