

Certification for Competitive Bid and/or Contract (Non-Collusion Certification)

NOTE: A certification shall be included with any competitive bid goods or services.	and/or contract exceeding \$5,000.00 submitted to the State for
Agency Name: OMES/Employees Group Insurance Division	Agency Number: 090
Solicitation or Purchase Order #: 0900000478	
Supplier Legal Name:	
certifying the facts pertaining to the existence of collusion employees, as well as facts pertaining to the giving or of special consideration in the letting of any contract pursus. 2. I am fully aware of the facts and circumstances surrour have been personally and directly involved in the proces. 3. Neither the bidder nor anyone subject to the bidder's disease at the contract of the process. a. to any collusion among bidders in restraint of the refrain from bidding, b. to any collusion with any state official or employed as to any other terms of such prospective of the contraction in the letting described of the contraction of the letting described of the lettin	Iding the making of the bid to which this statement is attached and edings leading to the submission of such bid; and rection or control has been a party: of freedom of competition by agreement to bid at a fixed price or to ployee as to quantity, quality or price in the prospective contract, or intract, nor a state official concerning exchange of money or other thing of of a contract, nor litical subdivision official or employee as to create a sole-source .1. of this title. not, neither the contractor nor anyone subject to the contractor's y, give or donate to any officer or employee of the State of indirectly, in procuring this contract herein.
The undersigned, duly authorized agent for the above named supplier, by signing below acknowledges this certification statement is executed for the purposes of:	
the competitive bid attached herewith and contract, if awarded to said supplier;OR	
the contract attached herewith, which was not competitively bid and awarded by the agency pursuant to applicable Oklahoma statutes.	
Supplier Authorized Signature	Certified This Date
Printed Name	Title
Phone Number	Email

Fax Number