



CONNECTICUT HEALTH INSURANCE EXCHANGE AFFIRMATION OF RECEIPT OF STATE ETHICS LAWS SUMMARY

*Written or electronic affirmation to accompany a large **Connecticut Health Insurance Exchange** construction or procurement contract, having a cost of more than \$500,000, pursuant to Connecticut General Statutes §§ 1-101mm and 1-101qq*

INSTRUCTIONS:

Complete all sections of the form. Submit completed form to **The Connecticut Health Insurance Exchange ("CTHIX")** or contractor, as directed below.

CHECK ONE:

- I am a person seeking a large **CTHIX** construction or procurement contract. I am submitting this affirmation to **CTHIX** with my bid or proposal. [Check this box if the contract will be awarded through a competitive process.]
- I am a contractor who has been awarded a large **CTHIX** construction or procurement contract. I am submitting this affirmation to **CTHIX** agency at the time of contract execution. [Check this box if the contract was a sole source award.]
- I am a subcontractor or consultant of a contractor who has been awarded a large **CTHIX** construction or procurement contract. I am submitting this affirmation to the contractor.
- I am a contractor who has already filed an affirmation, but I am updating such affirmation either (i) no later than thirty (30) days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

IMPORTANT NOTE:

Within fifteen (15) days after the request of **CTHIX** for such affirmation contractors shall submit the affirmations of their subcontractors and consultants to **CTHIX**. Failure to submit such affirmations in a timely manner shall be cause for termination of the large State construction or procurement contract.

AFFIRMATION:

I, the undersigned person, contractor, subcontractor, consultant, or the duly authorized representative thereof, affirm (1) receipt of the summary of State ethics laws* developed by the Office of State Ethics pursuant to Connecticut General Statutes § 1-81b and (2) that key employees of such person, contractor, subcontractor, or consultant have read and understand the summary and agree to comply with its provisions.

* The summary of State ethics laws is available on the State of Connecticut's Office of State Ethics website.

Signature

Date

Printed Name

Title

Firm or Corporation (if applicable)

Street Address

City

State

Zip

THE CONNECTICUT HEALTH INSURANCE EXCHANGE

By _____

Its: