



**THE SCHOOL DISTRICT OF PALM BEACH COUNTY**  
**Beneficial Interest and Disclosure of Ownership Affidavit**

Bid No. \_\_\_\_\_ Project No./ Title \_\_\_\_\_

Corporate Name RFP Depot LLC Tax FEIN No. 27-0012672

Before me, the undersigned authority, personally appeared, \_\_\_\_\_, ("Corporate Representative") this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_, who, first being duly sworn, as required by law, subject to the penalties prescribed for perjury, deposes and says:

- 1) Corporate Representative has read the contents of this Affidavit, has actual knowledge of the facts contained herein, and states that the facts contained herein are true, correct, and complete.
- 2) The following is a list of every "person" (as defined in Section 1.01(3), Florida Statutes to include individuals, children firms, associates, joint adventures, partnerships, estates, trusts, business trusts, syndicates, fiduciaries, corporations and all other groups and combinations) holding 5% or more of the beneficial interest in the disclosing entity: (If more space is needed, attach separate sheet)

**A. Persons or corporate entities owning 5% or more:**

<u>Private investment group of over</u> Name	<u>100 Members.</u> Address	Percentage
<u>Ron Pollock, Investment Management Committee Chair</u> Name	<u></u> Address	Percentage

**B. Persons or corporate entities who hold by proxy the voting power of 5% or more:**

Name	Address	Percentage
Name	Address	Percentage
Name	Address	Percentage

**C. Stock held for others and for whom held:**

Name	Address	Percentage
From Whom Held	Address	Percentage
Name	Address	Percentage
From Whom Held	Address	Percentage
Name	Address	Percentage
From Whom Held	Address	Percentage

**CORPORATE REPRESENTATIVE**

By: \_\_\_\_\_

**SWORN TO** and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_, by \_\_\_\_\_

Such person(s) (Notary Public must check applicable box).

is/are personally known to me.  produced a current driver license(s).  produced \_\_\_\_\_ as identification.

(NOTARY PUBLIC SEAL)

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
(Print, Type or Stamp Name of Notary Public)