

March 1, 2023

To: Stephanie Hee – Johnston

NRH20 Family Water Park

shee@nrh2o.com

Good Morning Stephanie,

**Please find following the 3 pages that
required signatures.**

Thank you for all your help.

Dan O'Bannon

Gravity Payments Inc.

800 989 2135 x 314

dano@chargeitpro.com

CONFLICT OF INTEREST QUESTIONNAIRE

For vendor doing business with local governmental entity

FORM CIQ

This questionnaire reflects changes made to the law by H.B. 23, 84th Leg., Regular Session.

This questionnaire is being filed in accordance with Chapter 176, Local Government Code, by a vendor who has a business relationship as defined by Section 176.001(1-a) with a local governmental entity and the vendor meets requirements under Section 176.006(a).

By law this questionnaire must be filed with the records administrator of the local governmental entity not later than the 7th business day after the date the vendor becomes aware of facts that require the statement to be filed. See Section 176.006(a-1), Local Government Code.

A vendor commits an offense if the vendor knowingly violates Section 176.006, Local Government Code. An offense under this section is a misdemeanor.

OFFICE USE ONLY

Date Received

1 Name of vendor who has a business relationship with local governmental entity.

Gravity Payments, Inc.

2 ☐ Check this box if you are filing an update to a previously filed questionnaire. (The law requires that you file an updated completed questionnaire with the appropriate filing authority not later than the 7th business day after the date on which you became aware that the originally filed questionnaire was incomplete or inaccurate.)

3 Name of local government officer about whom the information is being disclosed.

Name of Officer

4 Describe each employment or other business relationship with the local government officer, or a family member of the officer, as described by Section 176.003(a)(2)(A). Also describe any family relationship with the local government officer. Complete subparts A and B for each employment or business relationship described. Attach additional pages to this Form CIQ as necessary.

A. Is the local government officer or a family member of the officer receiving or likely to receive taxable income, other than investment income, from the vendor?

☐ Yes ☐ No

B. Is the vendor receiving or likely to receive taxable income, other than investment income, from or at the direction of the local government officer or a family member of the officer AND the taxable income is not received from the local governmental entity?

☐ Yes ☐ No

5 Describe each employment or business relationship that the vendor named in Section 1 maintains with a corporation or other business entity with respect to which the local government officer serves as an officer or director, or holds an ownership interest of one percent or more.

6 ☐ Check this box if the vendor has given the local government officer or a family member of the officer one or more gifts as described in Section 176.003(a)(2)(B), excluding gifts described in Section 176.003(a-1).

7 David R. O'Bannon
Signature of vendor doing business with the governmental entity

3/1/23
Date

BID CERTIFICATION

The Undersigned, in submitting this bid, represents and certifies:

- a. He/she is fully informed regarding the preparation, contents and circumstances of the attached bid;
- b. He/she proposes to furnish all equipment/service at the prices quoted herein and bid is in strict accordance with the conditions and specifications stated herein;
- c. There will be at no time a misunderstanding as to the intent of the specifications or conditions to be overcome or pleaded after the bids are opened;
- d. He/she is an equal opportunity employer, and will not discriminate with regard to race, color, national origin, age or sex in the performance of this contract.
- e. The undersigned hereby certifies that he/she has read, understands and agrees that acceptance by the City of North Richland Hills of the bidder's offer by issuance of a purchase order will create a binding contract. Further, he/she agrees to fully comply with documentary forms herewith made a part of this specific procurement.

COMPANY: Gravity Payments Inc
ADDRESS: 110 N 27th St
CITY, STATE & ZIP: Boise, ID 83616
TELEPHONE: 800 989 2135
FAX: 888 835 2077
EMAIL: dobannon@gravitypayments.com
SIGNATURE: Daniel F. O'Bannon
PRINTED NAME: DANIEL F. O'BANNON
DATE: 3/1/23

NON-COLLUSION AFFIDAVIT OF BIDDER

State of Idaho County of Ada

Daniel Obannon verifies that:
(Name)

- (1) He/She is owner, partner, officer, representative, or agent of
Gravity Payments Inc., has submitted the attached
bid: (Company Name)
- (2) He/She is fully informed in respect to the preparation, contents and circumstances in regard to attached bid;
- (3) Neither said bidder nor any of its officers, partners, agents or employees has in any way colluded, conspired or agreed, directly or indirectly with any other bidder, firm or person to submit a collusive or sham bid in connection with attached bid and the price or prices quoted herein are fair and proper.

Daniel F. Obannon
SIGNATURE

Daniel F. Obannon
PRINTED NAME

Subscribed and sworn to before me this

1st Day of March 2023.


NOTARY PUBLIC in and for

Ada County, ~~Texas~~ Idaho

My commission expires: 02-01-2029

MICHAEL PARSON
Notary Public - State of Idaho
Commission Number 20230525
My Commission Expires 02-01-2029

THIS FORM MUST BE COMPLETED, NOTARIZED AND SUBMITTED WITH BID