

**SUBMISSION OF THE FOLLOWING DOCUMENTS ARE REQUIRED FOR  
CONTINUING MBE/WBE/VBE NO CHANGE AFFIDAVIT CERTIFICATION:**

1. Affidavit of Minority and/or Women Business Enterprise (MBE/WBE) Veteran Business Enterprise/Service-Disabled Veteran Business Enterprise (VBE/SDVBE). **Application Must Be Signed By An Authorized Officer of the Firm and Be Notarized.**
2. Recent signed U.S. Federal Corporate Tax Return including all Schedules, Statements and Attachments
3. Recent signed U.S. Federal Tax Return for all Affiliates including all Schedules, Statements and Attachments
4. Recent signed U.S. Federal Individual Tax Return including all Schedules, Statements and Attachments
5. Recent Minutes of the Stockholders' Meeting documenting the Election of Directors
6. Recent Minutes of the Board of Directors' Meeting documenting the Election of Officers
7. Recent Managers/Members Meeting Minutes
8. Current Personal Net Worth Statement for qualifying owner(s), which represents 51% ownership in firm
9. State of Illinois Letter of Good Standing
10. Current Licenses, Professional, Local, City and State or Statement regarding License requirements
11. MBE/DBE/WBE or SBA 8A Certification(s) or Denials
12. Most recent Income Statement and Balance Sheet

## Affidavit

I/We swear there have been no changes in the circumstance of (Firm) \_\_\_\_\_ affecting its ability to meet the minority and/or woman owned status. There have been no material changes in the information provided in the certification application, except for any changes which have been reported to the Office of Contract Compliance.

The undersigned swears that the foregoing statements are true and current and include all information necessary to identify and explain the operation of (Firm) \_\_\_\_\_ as well as the ownership thereof. The owner also affirms that the minority and/or woman owned interest in the business constitute majority control over business operations. Furthermore, the undersigned agrees to site visits and will provide upon request current, complete and accurate information regarding actual work performed on any project, the payment thereof and any proposed changes, of the foregoing arrangements and to permit the audit and examination of books, records and files of the named firm.

**I/We understand and acknowledge that to fraudulently obtain or retain certification or public monies, to willfully make a false statement to an official for the purpose of influencing certification eligibility or to obstruct or impede an official or employee who is investigating the qualification of business which has requested certification qualifies as a Class 2 felony subject to Prosecution under 720 ILCS 5/33C of the Criminal Code of the State of Illinois. ANY MATERIAL MISREPRESENTATION OF THE INFORMATION IN THIS DOCUMENT WILL BE GROUNDS FOR: (1) DE-CERTIFICATION/REMOVAL OF ELIGIBILITY; (2) DEBARMENT; (3) TERMINATING ANY CONTRACT WHICH MAY BE AWARDED; AND/OR (4) INITIATING ACTION UNDER FEDERAL OR STATE LAWS CONCERNING FALSE STATEMENTS.**

It shall be the duty of all county employees, officials, agents, contractors, sub-contractors, licensees, grantees or persons doing business seeking County contracts, to cooperate with the Office of the Independent Inspector General (OIIG) in the conduct of investigations undertaken pursuant to this division. It shall be unlawful for any person subject to this section to refuse to cooperate with the (OIIG) as required by this section. The penalty for such violation shall be governed by Section 2-291 of the County's OIIG Ordinance.

**All qualifying owners must sign below:**

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(Signature of Owner, Title)

Date

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(Signature of Owner, Title)

Date

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(Signature of Owner, Title)

Date

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Notary Seal: Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Signed: \_\_\_\_\_

Notary Public in and for the County of \_\_\_\_\_ State: \_\_\_\_\_

**Notary Seal**

My Commission expires: \_\_\_\_\_

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**Return this Affidavit to:**

Office of Contract Compliance  
118 N. Clark Street, Room 1020  
Chicago, IL 60602