

**Attachment 13 – Independence Affidavit**

The undersigned individual, being duly sworn, deposes and says that:

1. He/She is \_\_\_\_\_ of \_\_\_\_\_, the RESPONDENT that has submitted the attached Proposal;
  
2. a. Below is a list and description of any relationships, professional, financial or otherwise that RESPONDENT may have with the TPA, its elected or appointed officials, its employees or agents or any of its agencies or component units for the past two (2) years.  
  
b. Additionally, the RESPONDENT agrees and understands that RESPONDENT shall give the TPA written notice of any other relationships professional, financial or otherwise that RESPONDENT enters into with the TPA its elected or appointed officials, its employees or agents or any of its agencies or component units during the period of this Agreement.

(If paragraph 2(a) above does not apply, please indicate by stating, “Not applicable” in the space below.)

[THIS SPACE INTENTIONALLY LEFT BLANK]

3. I have attached an additional page to this form explaining why such relationships do not constitute a conflict of interest relative to performing the Services sought in the RFP.

\_\_\_\_\_  
Signature (ink only)

\_\_\_\_\_  
Print Name (CORPORATE SEAL)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

STATE OF FLORIDA )  
 )  
\_\_\_\_\_ COUNTY )

The foregoing document was sworn to and subscribed before me by \_\_\_\_\_ by means of [ ] physical presence or [ ] online notarization, and \_\_\_\_\_ are personally know to me or have produced \_\_\_\_\_ as identification and who did take an oath.

WITNESS MY HAND AND OFFICIAL SEAL THIS \_\_\_ DAY OF \_\_\_\_\_, 2025.

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

\_\_\_\_\_  
Notary Public Printed Signature

\_\_\_\_\_  
Notary Stamp Seal

**FAILURE TO COMPLETE, SIGN AND RETURN THIS FORM  
MAY DEEM YOUR PROPOSAL NON-RESPONSIVE**