Effective: 05-Jan-10

FINANCE AND ADMINISTRATION CABINET OFFICE OF EQUAL EMPLOYMENT OPPORTUNITY AND CONTRACT COMPLIANCE CAPITOL ANNEX, ROOM 395, FRANKFORT, KY 40601 TELEPHONE: 502-564-2874 (FAX: 502-564-1055)

AFFIDAVIT OF INTENT TO COMPLY

A substitute or alternate version of this form will not be accepted or processed.

The undersigned, after first being duly sworn, states as follows: I,	ows: L. Arthur E. Adams Jr.
	Type or Print Name
have authority to sign this affidavit on behalf of	Pitney Bowes Inc.
	Type or Print Company Name
Check one:	
Kentucky Civil Rights Act," and "submit data required by 45 I also acknowledge and agree that the Finance and Admini request additional information and/or documentation, in account contract awarded. I further acknowledge and agree the	ned company will "comply in full with all requirements of the 5.560 to 45.640 upon being designated the successful bidder." istration Cabinet, Office of EEO and Contract Compliance may cordance with KRS 45.550 et seq at any point during the life of at a failure to provide information requested in a timely manner and all legal remedies available, including but not limited to, ness with the Commonwealth in the future.
company is not an "employer" as defined by KRS 344.030(company will "submit data required by 45.560 to 45.640 up acknowledge and agree that the Finance and Administratic request additional information and/or documentation, in account contract awarded. I further acknowledge and agree the	on being designated the successful bidder." I also on Cabinet, Office of EEO and Contract Compliance may cordance with KRS 45.550 et seg at any point during the life of at a failure to provide information requested in a timely manner and all legal remedies available, including but not limited to,
AFFIANT:	Affix Notary Seal Below
Signature of Certifying Official (must be an official or manager)	
Arthur E. Adams Jr. Director, Government Contract Compliance	·
Type or Print Name and Title of Certifying Official	
May 4, 2021	
Date	
-	
Commonwealth or State	
County of	
Subscribed and sworn to before me by	
`	Affiant)/ (Title) day of
of this	
MY COMMISSION EXPIRES ON: (Date)	
NOTARY PUBLIC	